

1 D 12 Kelly Johnson 1920-1946
1 D 12 - 136 Memoranda

Memorandum relative to Electrocardiogram:

Saturday morning, June 13th I met the technician from the Electrocardiograph Room to see her do an electrocardiograph on a patient in bed. The process was as follows:

When the technician came to the ward she brought with her the electrodes and the pads. The latter had been wrung out of salt solution down stairs where she had made it fresh. She applied these electrodes and pads to the lower part of both arms and the lower part of one leg. She then attached the wires to these. The wires were so marked that they indicated the extremity to which they were attached. She then plugged the wire into the outlet by the head of the bed, then went out into the corridor near the diet kitchen and moved a switch in the ~~wire~~ ^{wire} cabinet to the number which corresponded to the number of the outlet by the bedside. This process in the ward to this point occupied 6 minutes.

I then went with her down to the Electrocardiograph Room while she took the graph and came back up with her to the ward. This took about 5 minutes. She then removed the electrodes which took about 1 minute more.

It is my opinion that it probably took her about 5 minutes to make the salt solution, get out the pads, come to the ward the first time and return to the Electrocardiograph Room the last time. A total for the whole process would be about 15 minutes.

This patient was very quiet, really stuporous, and there was no delay.

If done in the ward by the nurse the process would be the following:

- | | |
|--|------------|
| 1. Get telephone and plug in - | ½ minute |
| 2. Get pads and electrodes, prepare salt solution, ring out and go to the bed - | 3 minutes |
| 3. Apply to the patient repeating what had been done by the technician allowing the time the same as hers.- | 6 minutes |
| 4. Telephone to the Electrocardiograph Room and, as I understand it the nurse would need to remain at this telephone while the graph was taken as there is no way of calling the nurse to the bedside when the graph is finished. Even if she left the bedside the time would be too short to accomplish anything. - | 3 minutes. |
| 5. Removal of apparatus as done by the technician. - | 1 minute |
| 6. Putting away of telephone and pads, washing out the containers in which the salt solution had been. - <i>during</i> | 3 minutes. |

Hand - later pulling away 1½ - for in part of bed.
This gives a total of 16½ minutes with no interruptions. The nurse on the ward is more apt to be interrupted than the technician on the ward.

Miss Sewall followed this through three or four days ago and her estimate was 15 minutes. I realize that I have made only one observation and I shall be glad to be set straight on any part where I am in error.

Sally Johnson
Sally Johnson, R.N.
Principal.

I. Repeated classes.

Two admitted each year. Curriculum of 4 months preliminary course and one month junior term taught twice each year. With the exception of a six-hour course in public health which is taught only twice each year, every subject in the curriculum of the capped students is taught three times each year. This is in order to be able to meet the heavy affiliating program for both groups of students--those going out and coming in.

II. Frequency, hours, and groups for conference.

The entire group, as shown here, meets on Wednesdays and Fridays from 11:30 to 1. A smaller group of supervisors and office group meet for a short period every Monday morning at 8:30.

On Thursday at 12, there is a conference which includes Miss Sleeper, Miss Smith, Miss Kempf, and myself.

III. Demonstration of a conference as it is conducted here at the Massachusetts General.

This is not a demonstration of how it might be conducted, or should be conducted. We do not set this up as a model. We use it as an administrative tool and as a teaching tool. We all agree that it is useful.

IV. Naming factors that we have learned contribute to its success.

Meet on time - close on time - arrange grouping so can see one another and hear one another - those sitting near to the leader must be reminded that those sitting out in the suburbs wish to hear - no person should monopolize the time and should herself be able to sense a feeling of disinterestedness or boredom - members should speak to the point and not ramble - should have the facts in hand unless makes a statement that unable to verify certain opinions - should never exaggerate - there should be a willingness to give and take but always with courtesy without sarcasm or show of personal feeling. This is more true of the leader than any of the group. If the leader sets up a democratic situation, she must expect to sometimes find herself in a position where she wonders what her own status is--whether that of a leader or most inexperienced member of the group. She must be expected to be told (with enthusiasm of discovery) certain facts that she learned years ago. The leader must never embarrass a member of the group before the others, even if she strongly disagrees. It may be necessary to say "I don't agree with you" - "I think we can't do what you recommend but I'll talk it out with you afterwards." I am sure that the best intentioned leader does sometimes embarrass a member of the group. But if the group knows that the leader is essentially kind and square, the group will be a forgiving one. However, no leader should often sin in this direction.

The youngest member should be given her full share of time. She must learn how to use it and the older members must remain placid while she learns to participate in such a conference. The conference should be a place where there can be certain emotional outlets. The members should feel that they are going to find help, but if there is no remedy that they will be helped to endure. While some "cures" may be postponed, some are never found. Therefore,

all must "endure" during the interim. Nurses as a group, however, are growing more articulate. They have endured too long and are now beginning to look for some other cures.

Some action should be taken on subjects presented even if that action is no action--if it needs further discussion or more information. The leader should place responsibility for action.

V. This conference

Each member has in mind two subjects which are current ones. Each will present but one, as we make the first round of the circle, in order that too much time will not be consumed and in order to give opportunity for the audience to ask questions or contribute discussion. In the subject matter we have tried to include a number of the subjects concerning which questions have been asked by the membership of this association.

VI. Miscellaneous

Folder students, advisors, situations where supervisor and student have before me talked out student difficulties. More frequent writing to the family. As supervisors have become more experienced, I feel more sure about contacting the family.

Introductory note:

Will tell you the personnel of the conference group and speak briefly of their responsibilities. May give you some helpful suggestions relative to your own set up and you will be able to give us suggestions.

Personnel of the conference:

1. Miss Sleeper, assistant superintendent of nurses and assistant principal of the school. Instructor in history of nursing. Supervisor of the operating room and of the emergency ward are responsible to Miss Sleeper. Any new policy or practice in these two departments clear through Miss Sleeper. One of her major jobs is to see to it that the principal of the school does not become a manic-depressive.
2. Miss Smith, For some time will probably be known as successor to Miss McCrae. Assistant principal, supervisor of instruction in nursing arts and instructor in nursing. Last year, one of her major accomplishments was to get on to the wards an outline of a large proportion of our nursing procedures. Miss Smith has, as you know, with collaborators published a book, "Principles of Nursing Care."
3. Miss Kempf, assistant principal, supervisor of instruction in sciences and clinical subjects, instructor in psychology, sociology, and principles of teaching. She is responsible for the content of the various courses, for seeing that overlapping is kept at a minimum, and that up-to-date material is included. That new courses are installed. For the class schedules--that every student upon graduation has had all of the courses. She must work with Miss Burgess in order that the classes are so scheduled as to fit affiliations.
4. Miss Burgess, second assistant superintendent of nurses. Instructor in health education. Responsibility--planning of the student field experience and stabilizing of the nursing service. This means that 189 capped M. G. H. students, 27 affiliates from McLean, and 9 affiliates from Simmons have the required experience at the end of their stay. This must be done with 22 students always at the Boston Lying In, 7 at the Eye and Ear Infirmary, 2 at Boston City, 4 in public health, and 10 at McLean -- to say nothing of all the adjustments to illness and absence.
5. Miss Williams, part time office assistant. Coverage of the office during the middle of the day. Take certain responsibilities for the affiliating group, submitting reports to the home schools and works with the special program students coming from Simmons. Example: ward teaching, ward administration, or training school administration. Answers questionnaires. Takes care of the needs of the endless inquiries that come in over telephones and personal office calls.
6. Miss Taylor. One of the three ward supervisors. Five large medical wards plus a small research ward. Instructor in medical nursing. (Expert printer. Did the printing on the cardboard upon which nursing forms are displayed.)
7. Miss Lepper, supervisor of lower wards--mainly surgical. Instructor in surgical nursing.
8. Miss Convelski, instructor in the upper surgical wards and instructor in nursing.

9. Miss Tapley, supervisor of Baker Memorial. The person with whom we make the contact relative to students assigned to the Baker.
10. Miss McCollum, supervisor of residences, lay personnel, ward helpers, ward secretaries, chamber maids, orderlies. Also of our orthopedic, as Miss McCollum has had years of experience with orthopedics.
11. Miss Cartland. Many of you know as a visiting instructor, is now with us as instructor of sciences.
12. Mrs. Bourgeois, assistant to Miss Kempf, is absent because of illness. Teaches materia medica and assists with the sciences.
13. Miss Hollister, acting supervisor of nurses in the Out Patient department. Teaches in the clinics. Responsible for our excursions to other institutions.
14. Miss Evers, assistant to Miss Smith--that is the teaching of nursing arts. Today is representing Miss Stevens who is supervisor of pediatrics. Miss Stevens is attending a meeting of the State Nurses Association this afternoon.
15. Miss Roberts, physical social director. Responsible for our extra curricula program. Assists with the work in posture.
16. A person who does not come regularly to this conference is Miss Fraser who is responsible for the health program of the students and the care of their illnesses. She probably should come more often than she does, but it is very difficult to make herself available at that time.

You should be conscious of the fact that the night supervisor is not here, nor is she present in these conferences. We found this very hard to plan for. She does see me each Monday evening at quarter past seven. There is much yet to be done with our night situation.

Here I would like to stop to say that never before has the school had so well prepared a group. I wonder if it ever will again. Before long, three of these young women will be leaving us and each will make a vacancy which it will be hard to fill. In the group are five young women who have Masters degrees:

Sleeper
Kempf
Smith
Williams
Bourgeois

Six who have Bachelors degrees:

Burgess	Roberts
Cartland	Evers
Johnson	
Taylor	

The others have had either a considerable amount of academic work or many years of valuable experience. One of the most valuable contributions of such a group is their ability to think and act objectively without too much emotion and to deal fairly and squarely with both graduates and student groups. I believe that both graduates and students have great respect for this staff. Any group who hold positions such as are held by these young women must every day meet demands that would stagger young women in other forms of work.

Nov. 4, 1932.

MEMORANDUM

RELATIVE TO EDUCATIONAL ENTRANCE REQUIREMENTS OF SCHOOLS OF
NURSING IN MASSACHUSETTS

The Massachusetts Board of Nurse Examiners has ruled that after September 1, 1932 all students entering approved schools of nursing in Massachusetts must have two years of high school. After September 1, 1933, they must have four years of high school. All schools registered in New York require students to have four years of high school.

As the Butler Hospital in Providence, and McLean Hospital are both registered in New York, the young woman to whom Doctor Jones refers would not be eligible for these schools. So far as my knowledge extends, the next recommendation would be to some one of the state hospitals.

Frankly, if I were making the recommendation to this young woman I would recommend her to apply to the Massachusetts State Infirmity at Tewksbury. That is not exactly a hospital for the mentally ill, but they have a large group of these patients. I have always thought well of that school, and highly of Miss McDonald, who has been its superintendent for many years. There are also schools of nursing at the State Hospitals in Worcester, Taunton, Medfield, and Danvers.

I am also listing below the names of schools that, according to a list published January 1, 1931, did not require full high school. They may have, of course, raised their requirements during the current year. As a matter of fact, Tewksbury is listed as requiring four years, but I rather think that they do not always require a diploma.

Commonwealth Avenue, Boston.
Fenway Hospital, Boston.
Harley Private, Boston
Hart Private, Boston.
Cambridge City, Cambridge
Chelsea Memorial, Chelsea
Danvers State, Danvers
Whidden Memorial, Everett.
Framingham-Union, Framingham.

St. Joseph's, Lowell
Medfield State, Medfield
Milford Hospital, Milford.
North Adams Hospital, North Adams
Jordan Hospital, Plymouth
Salem Hospital, Salem
Wesson Hospital, Springfield
Morton Hospital, Taunton
Westboro State, Westboro.

From S. J. ...
To Dr. ...
(about the history
of MGH)

M E M O R A N D A

Page 2:

The sentence relative to Miss Sturtevant seems to read: "Miss Georgia L. Sturtevant, who resigned this position in 1894 was in charge of the nursing from 1868 to 1876 in which later years, after a probationary service of three years in certain of the wards of the Hospital, the Boston Training School took over the nursing in the whole Hospital." Isn't this sentence involved? It does not show that the school of nursing was in charge of certain wards beginning in 1873. Further discussion - Look at the end of these notes.

Page 9:

First line would read better if it started: "The evolution of nursing schools." The possessive is awkward. We do not say "Doctor's Schools", "Lawyer's Schools", etc.
9th line from the bottom... "better prepared in better schools." The word "trained" dates us.
Line below, special preparation instead of training.
Next line .. Could be smoothed by reading: "devoted themselves to work other than the direct bedside care of the sick."
I shall look up that liberal arts matter in our circular.
Second line from the bottom ... I like "close affiliations" rather than "Intimate."

Page 14:

You bet I can get a statement out of Teachers College about Miss Parsons attendance there and I shall get a letter off today. She also took the administration course here in 1909. Can show you that record. I would like to have Miss Parsons have full credit for what she has done. She was twenty years ahead of her time. She not only had rich experience but she took all that was offered in the way of special work in her day. She went to McLean Hospital for a year after she graduated from here and had their diploma. She took this year at Teachers College and she took our administration course. I think that reference to her preparation being the school of experience is true, but she did all these other things in addition. Most of us appreciated her when she was here. I did. But, every year my respect for her for what she did grows.

Page 15:

No apostrophe in Teachers College. The name is without the apostrophe.

Second page which is numbered 15:

The spelling of the word pretence sent me to the dictionary. It was there but evidently second choice.

Page 2:

The sentence relative to Miss Sturtevant seems to read: "Miss Georgia L. Sturtevant, who resigned this position in 1884 was in charge of the nursing from 1882 to 1883 in which latter years, after a probationary service of three years in certain of the wards of the Hospital, the Boston Training School took over the nursing in the whole Hospital." Is't this sentence involved? It does not show that the school of nursing was in charge of certain wards beginning in 1875. Further discussion - look at the end of these notes.

Page 3:

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5th line from the bottom... "better prepared in better schools." The word "trained" dates up.
Line below, special preparation instead of training.
Next line .. Could be amended by reading: "devoted themselves to work other than the direct bedside care of the sick."
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Page 5:

No spectrographs in Teachers College. The name is without the spectrographs.

Second page which is numbered 15:

The spelling of the word protons sent me to the dictionary. It was there but evidently second choice.

Chronological Lists

1922:

I have myself been somewhat inconsistent relative to the extension of the experience in the Pediatric Department. In 1922 it should read: "Extension of experience in Pediatric Department to all students." Previous to that all students did not go to our pediatric wards. They "picked" up some experience with children on Wards F, I and G. That line should be in there because it shows how recently we have seen to it that all students had pediatric experience.

1923:

Do the modern capitalization rules require a capital letter after a colon? I notice that you frequently use it. Example, the first line of 1922 a capital A for address. Have you planned to add "renewed" after McLean Hospital? It should be added.

1924:

Omit the line about increase of vacation. That sentence in my report is evidently one of my few white lies. What we really did was to try to allow a student a week off duty as a matter of prevention of more serious illnesses. We could never administer it. In a way that added to the vacation. I suppose it was so involved that I did not try to interpret the ruling in the Annual Report. A capital A follows a colon.

1926:

The note relative to the public health nurse has been repeated - line two and the last line. The second note is the better.

1927:

Confusion of the two points in the fourth line. The admitting of the two classes of probationers has no relationship to the repetition of the subjects in the curriculum beyond the preliminary course. 1927 may have been the year when we admitted two classes instead of three. That should be investigated. It is the year when we started to teach the curriculum twice a year. The second statement might read "repetition of all subjects in the curriculum, with one exception, resulting in better correlation of theory and practice." Should this be "of". You have "in."

1929:

Course of nine public health nursing lectures.

1933:

I have myself been somewhat inconsistent relative to the extension of the experience in the Pediatric Department. In 1932 it should read: "Extension of experience in Pediatric Department to all students." Previous to that all students did not go to our pediatric wards. They "picked" up some experience with children on wards F, I and G. That line should be in there because it shows how recently we have seen to it that all students had pediatric experience.

1933:

Do the modern capitalization rules require a capital letter after a colon? I notice that you frequently use it. Example, the first line of 1932 a capital A for address. Have you planned to add "renewed" after Holman Hospital? It should be added.

1934:

On the line about insurance of vacation. That sentence in my report is evidently one of my few white lies. What we really did was to try to allow a student a week off duty as a matter of prevention of more serious illnesses. We could never administer it. In a way that added to the vacation. I suppose it was so involved that I did not try to interpret the ruling in the Annual Report. A capital A follows a colon.

1936:

The note relative to the public health nurse has been repeated - line two and the last line. The second note is the better.

1937:

Continuation of the two points in the fourth line. The admitting of the two classes of probationers has no relationship to the repetition of the subjects in the curriculum beyond the preliminary course. 1937 may have been the year when we admitted two classes instead of three. That should be investigated. It is the year when we started to teach the curriculum twice a year. The second statement might read "repetition of all subjects in the curriculum, with one exception, resulting in better correlation of theory and practice." Should this be "of". You have "in".

1939:

Course of the public health nursing lectures.

Chronological Lists - page 2.

1933:

Those aims need policing up. I will try at the end of these notes. 4th line from the bottom is not quite correct. Omit that line since a later year states the courses of the new school at Simmons. This progress sentence better be left out.

That house on North Grove Street is numbered 4. Think it would be well to put that number in. We have so many different houses on North Grove Street. (Probably we shall make the Northern Mortuary over into a nurses' home some day!)

Add "in Baker" after group nursing.

1934:

After McLean Hospital add "for affiliation of one year's duration." You left out the remodelling of the Ladder House for men students. That number is 16 North Grove.

Add in this year "Course for orderlies discontinued."

The last line should read "and continuance of former five year course in affiliation with this School."

1935:

3rd line probably should end with "and return of Red Cross Hospital Aides." (There were many of these women in the Hospital during the war. This is the reason for the use of the word "return.")

4th line from the bottom ... Might suppose that we employed new graduate nurses for this purpose. It might read "Appointment of certain members of the administration and teaching staff as advisers to students."

My notes state that we were housing nurses in ten different places. I would suggest that we stick this in somewhere. It re-emphasizes our long need of a nurses' home.

1933:

Those also need polishing up. I will try at the end of these notes.
4th line from the bottom is not quite correct. Omit that line since
a later year states the course of the new school at Simons. This
progress sentence better be left out.
That house on North Grove Street is numbered 4. I think it would be well
to put that number in. We have so many different houses on North Grove
Street. (Probably we shall make the Northern Parkway over into a
new one, some day)
Add "in house" after group meeting.

1934:

After McLean Hospital add "for affiliation of one year's duration."
You left out the remodeling of the ladder house for men students.
That number is 18 North Grove.
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My notes state that we were having nurses in ten different places. I
would suggest that we stick this in somewhere. It re-emphasizes our
long need of a nurses' home.

Miss Sturtevant who resigned from this position in 1894 was in charge of the nursing from 1868. In 1876, after a probationary service of three years in certain of the wards of the Hospital, the Boston Training School took over the nursing in the whole Hospital.

The aim of the school is to set up a program by means of which the student will learn to give intelligent and skilled nursing care, to teach others the principles and practices of health, to function intelligently as a health worker in the community, to maintain her own physical and mental health, to develop her own capacities as an individual, and to consider throughout this entire program, the patient as an individual.

ADDITIONAL ITEMS FOR DR. WASHBURN'S HISTORY

When did full high school begin?

1900 - Annual Report says full high school with diploma or certificates to show.

1911 - High school graduation or its equivalent and those who have had normal school or college course are preferred if they meet requirements in other particulars.

1912 - High school education or a good equivalent is required with an elementary knowledge of Latin, Anatomy, Physiology, Bacteriology and Chemistry.

When did we start the \$50.00 tuition?

When did we start discontinuing the allowance?

1912 - Voted to furnish uniforms and textbooks instead of giving an allowance as previously.

Owing to expense of the Preliminary Course a \$40.00 deposit was required on entrance. This sum was to be refunded at graduation and the school pin to be given.

Several scholarships of \$50.00 was offered at this time
1915 - Tuition fee of \$40.00 required. A deposit of \$10.00 was required for breakage, the balance of which was to be refunded on graduation.

1919 - \$50.00 tuition.

Increase in vacation -

1918 - 7 weeks vacation

1920 - 9 weeks vacation - Same as present allowance.

6 aims of School -

Omitted -

Development of the student as an individual

The first floor duty nurse in the General Hospital was employed on Ward 4. As near as I can discover this was in 1926.

The first ward secretary in the General Hospital was employed on Ward 30 beginning February 1929.

S:L

Ruth Sleeper, R.N.
Asst. Supt. of Nurses.

MASSACHUSETTS GENERAL HOSPITAL
TRAINING SCHOOL FOR NURSES

11/18/36

MEMORANDUM

TO: Dr. Baker

FROM: Miss Johnson

The following is the situation as I see it:-

For many years schools of nursing have admitted students who although High School graduates, had unsatisfactory preparation for schools of nursing. In order that there might be a sounder basic education, the State Board of Nurse Examiners determined the content of the High School course of applicants. The Board knows from experience that students have been admitted who did not meet the State's requirements and in all probability such admissions will continue. When such graduates present themselves for State Board examinations, they find themselves ineligible because of shortages in their High School preparation and thus a real hardship has been worked upon the student.

Because of the situation as explained in the previous paragraph, the State Board of Nurse Examiners took upon itself the responsibility of countersigning the additional credentials. Thus the final responsibility is placed on the Board. Frankly, I should not wish to carry the responsibility of passing on credentials which have been set up by another organization.

In two instances, Miss Sleeper and I have had credentials returned from the State House which we thought we had done with care and yet were not countersigned. I do realize that we may be a little less careful if we know that shortages are going to be picked up elsewhere and that the final responsibility will not be upon us. In other words, I should be very sorry to find myself in a position where we had admitted a student with credentials that did not meet the State Board. That student after graduating would not be eligible for graduation. With all the various weighing of different subjects, I doubt if any one of us is so good that we never make a mistake.

Our old requirements used to be four years of English and two years each of mathematics, languages, science and history. We might have a student meeting these requirements and yet her course so set up that it did not meet the State requirements. The second paragraph of the letter attached might be misleading. All "applications" do not need to be sent to the State House - only the High School record. In the future, certain duplications may be done away with by having the student get her own qualifying certificate, but it would have to be obtained from the same board. In New York state, the Board of Regents that corresponds to our

To: Dr. Baker
From: Miss Johnson

Board of Education, issues these certificates, but that is not done by the Board of Education in Massachusetts.

At the present moment, I am of the opinion that many principals are sending the High School records of all that apply to the State Board for them to sort out. They are not sending only those which in their opinion meet the requirements.

In my opinion, the real need is more help in the Board of Registrations. That department earns far more than it spends. A few years ago the cumulative "profit" was as I remember it \$12,000. The department earns enough to guarantee more spending. For many years the nurses have felt very strongly about this profit.

SJ/EA
11/18/36.

Massachusetts General Hospital

Boston Oct. 21, 1924.

FREDERIC A. WASHBURN M. D.

DIRECTOR

TRAINING SCHOOL FOR NURSES

SALLY JOHNSON, R. N. SUPERINTENDENT

MEMORANDUM

FROM: Miss Johnson

TO: Miss Ruth Johnston

You may remember that at graduation time last year, I put a notice on the Bulletin Board to the effect that student nurses who did not have their senior band at the time of graduation might not be eligible for graduation. I did that, that I might early notify the class of 1925 that members losing a large amount of time be forewarned.

After further consideration, we realized that literal interpretation of that notice would not work the same with members of all sections. For instance, a student coming in January, 1922, might lose five months and still have her senior band by graduation time; while a student coming in September, 1922, would not have her senior band by graduation time if she had lost five months.

I am sure that you understand the point which I am trying to make; namely, that a student who has lost a large amount of time should not graduate with her class, and I have given considerable thought as to what seems to be fair to the different sections. When I referred to the senior bands the point I really had in mind was that a student should be in her third year if she is to graduate. Working on this basis it seems to me that the following arrangement is fair to all sections. If any of you are able to think of some way more fair than this, I shall be glad to have you tell me about it.

Members of the January section: If they have lost no time are partially through at graduation time. If a member of that section is not in her third year she would have to have lost twelve months. Consequently, it seems fair that:

Any January section nurse who has lost twelve months will not be eligible for graduation.

The students who come in April will at graduation

*Graduation
must be in
last 3rd yr
former*

*Senior Bands -
eligible for graduation*

time (assuming that graduation is in January) have been here thirty-two months. One-third of that is, in round numbers, eleven, therefore:

Members of the April section who have lost eleven months will not be eligible for graduation.

Students who enter in September have at graduation time, been here twenty-seven months. One-third of twenty-seven is nine months, therefore:

Any student of the September section who has lost nine months is not eligible for graduation.

This seems fair for it gives the students who are here the longest period of time the longest allowance for loss; and the students who are here the shortest period of time the shortest allowance for loss.

Review:

Students entering in January, 1922 who have lost twelve months are not eligible for graduation.

Students who came in April, 1922 and have lost eleven months are not eligible for graduation.

Students who came in September, 1922 and have lost nine months are not eligible for graduation.

This is all in round numbers, as I realize the students come in the middle of the month and that graduation may be any time in January.

J.G

Sally Johnson
Sally Johnson, R.N.
Principal.

Note: The graduation of five-year people is always determined in conference with Simmons College. They usually graduate at the graduation which takes place during their fifth year. There are also the college graduates who are here for the two-year and four months course. It is my opinion that they too should be on duty two-thirds of their time.

S. M. J.

Sally Johnson

July 27, 1938

MEMORANDUM

TO: Dr. Washburn

FROM: Miss Johnson

RE: Material on History of the Training School.

Preamble:

I am giving my reactions which may not be sound as I have only the printed page and have not discussed with either you or Miss Boyer the content. Neither do I know how near this is to the final draft. For example, whether or not "School of Nursing" is just a notation to indicate the material or whether that is planned as the final title, I do not know. Our official title is Training School for Nurses although I imagine the time will come when we think it desirable to go through the agony of changing the name.

I think the first page is an excellent introduction in connection with the past and immediately tempts one's interest.

Page 2:

The dates 1868 to 1876 are confusing because we always refer to the foundation of the School as being in 1873. I do realize of course that at first only a limited number of the wards were under charge of the superintendents of nurses.

Page 4:

I have tried to think of instances where the Ladies' Committee have given the Superintendent of Nurses "advice". "Support" is just the right word. Since the name of the Committee includes the word "advisory", it would seem logical that advice were given. In addition to support one of the functions of the Committee is to interpret the nursing needs of patients in and out of the hospital to the Principal of the School and to interpret the School of Nursing to persons out in the community. Another function is to inform themselves of the needs of the School and to assist the Superintendent of Nurses and the Director of the Hospital in their efforts to fulfill these needs.

July 27, 1938

MEMORANDUM

TO: Dr. Johnson

FROM: Miss Johnson

RE: Material on History of the Training School.

Paragraph:

I am giving my reactions which may not be sound as I have only the printed page and have not discussed with either you or Miss Boyer the content. Neither do I know how near this is to the final draft. For example, whether or not "School of Nursing" is just a notation to indicate the material or whether that is planned as the final title, I do not know. Our official title is Training School for Nurses although I imagine the time will come when we think it desirable to go through the agency of changing the name.

I think the first page is an excellent introduction in connection with the past and immediately tempts one's interest.

Page 2:

The dates 1898 to 1878 are confusing because we always refer to the formation of the School as being in 1878. I do realize of course that at first only a limited number of the words were under charge of the superintendents of nurses.

Page 4:

I have tried to think of instances where the Ladies' Committee have given the superintendents of Nurses "advice". "Suggestion" is just the right word. Since the name of the Committee includes the word "advisory", it would seem logical that advice were given. In addition to support one of the functions of the Committee is to interpret the nursing needs of patients in and out of the hospital to the Principal of the School and to interpret the School of Nursing to persons out in the community. Another function is to inform themselves of the needs of the School and to make the superintendents of Nurses and the Director of the Hospital in their efforts to fulfill these needs.

Is there any point in saying that the interest of the Shattuck family is continued today through the person of Mrs. Henry Bigelow, daughter of Dr. Frederick Shattuck? (She directed the furnishing of the Parkman Street House).

Could the fourth line from the bottom be reconstructed? The sentence beginning "By distinguished appearance" seems to have two entirely different thoughts. Both statements are true, but the devotion did not depend upon her appearance and beauty. I would make two sentences.

I think the paragraph on the Advisory Committee, extending through pages 4 and 5, is excellent. Good choice of words.

Page 8:

A third of the way down the page, I would change "chances" to "opportunities."

I like the sentence which begins, "There are plans and expectations." It says much in few words.

Page 9:

What is the source of, "The Liberal Arts and Nursing Course?". Where is that terminology used?

Second paragraph of Page 9:

Four years of day high school required long before 1935. The statement which gave that impression was probably found in some of my writings. It really had to do with Canadian schools. Their high schools used to be three years in their smaller towns. About that time, although I think earlier, we required the Canadian to get four years of high school. My reference to this is to be sure that we do not leave the impression that it was 1935 before we required full high school. I know that it was required in 1920 when I came here and how long before would be hard to determine.

The \$50.00 tuition fee was long before 1935.

I presume that this history is stopping with the year 1935. If so, at the top of page 10 Boston City Hospital and Simmons College should be included -- relative to affiliations.

Page 10 - last paragraph:

Did we ever have a school for male nurses? I entered the School in 1907 (Dates in the margin 1903-1908) and there were no men in any of our courses. What is the source of this statement? Question of Miss Dolliver's day.

Is there any point in saying that the interest of the family is continued today through the person of Mrs. Henry Wigley, daughter of Dr. Frederick Shattuck? (She directed the furnishing of the Parkman Street House).

Could the fourth line from the bottom be reconstituted? The sentence beginning "by distinguished appearance" seems to have two entirely different thoughts. Both statements are true, but the deviation did not depend upon her appearance and beauty. I would make two sentences.

I think the paragraph on the Advisory Committee, extending through pages 4 and 5, is excellent. Good choice of words.

Page 6:

A third of the way down the page, I would change "common" to "opportunities."

I like the sentence which begins, "There are plans and expectations." It says much in few words.

Page 7:

What is the source of, "The Liberal Arts and Nursing Council"? There is that terminology used?

Second paragraph of Page 9:

Four years of day high school required long before 1935. The statement which gave that impression was probably found in some of my writings. It really had to do with Canadian schools. Their high schools used to be three years in their smaller towns. About that time, although I think earlier, we required the Canadian to get four years of high school. My reference to this is to be sure that we do not leave the impression that it was 1935 before we required full high school. I know that it was required in 1930 when I came here and how long before would be hard to determine.

The \$20.00 tuition fee was long before 1935.

I presume that this history is stopping with the year 1935. If so, at the top of page 10 Boston City Hospital and Simmons College should be included -- relative to affiliations.

Page 10 - last paragraph:

Did we ever have a school for male nurses? I entered the School in 1907 (Dates in the margin 1903-1908) and there were no men in any of our courses. What is the source of this statement? Question of Miss Belliver's day.

July 27, 1938

I had better get some more material as to the accomplishments of the Alumnae. I would like to see the present amount of the Endowment put in here, that is, principle and interest. The Treasurer could give the amount to date. It is in the vicinity of \$72,000 or \$73,000.

Page 11:

Should that last sentence be softened a little? Knowing the history, that sentence sounds to me as if the writer felt like writing, "At least she did succeed, etc." I think I would say, "During her administration she succeeded in, etc."

Page 12:

Miss Parsons attended Teachers College, Columbia University for a year of study. That was very progressive for that time. She attended for the year 1907-1908.

Page 13:

Miss McGrae's book is no longer a standard. It was published in 1925 and is now outmoded. As a matter of fact, we did not buy it for this next September class. Therefore, "has been" is used advisably and I think I would wind up that sentence by saying "has been the standard, not only in this School but in many others."

I have hesitated a little about the last paragraph. At first I felt that we should include a few words relative to the nurses who have made their mark as private duty nurses and as public health nurses. That group will read this book and I am afraid they will feel that they have been left out. Then as I think about it further, I realize that this book relates to the history and perhaps it would be all right to leave it as is. However, I am afraid that there would be misunderstanding and perhaps a little unhappiness. Some reference to that great body of private duty nurses and to the ever growing body of public health nurses would be, I think, wise. The last sentence is a graceful ending. Even if the last paragraph were made more inclusive as I have indicated, the last sentence would still be pertinent because, after all, the private duty nurse and public health nurse working out in her special field is an asset to the Hospital.

I had better get some more material as to the accomplishments of the Airman. I would like to see the present amount of the payment put in here, that is, principle and interest. The Treasury could give the amount to date. It is in the vicinity of \$72,000 or \$73,000.

Page 11:

Should that last sentence be reworded a little? Knowing the history, that sentence seems to me as if the writer felt like writing, "At least she did succeed, etc." I think I would say, "During her administration she succeeded in, etc."

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CHRONOLOGICAL EVENTS

The following are suggestions. There may be good reasons for following them or just as good reasons for not following them. These suggestions have not been formulated to be consistent with the general setup.

1921:

Omit additions to theoretical instructions, etc. Not of sufficient importance.

Omit reference to that nine days' leave per year. It was difficult to administer and we practically never use it.

I would include the circularization of the alumnae for the purpose of increasing enrollment. Those were the years when we had a desperate time in trying to get our quota of students.

I would add, "Incoming affiliates from seven schools." This is interesting because many of those schools have now gone out of existence. Schools that were small enough to need affiliation for general experience ultimately gave up having schools.

1922:

Omit establishment of a special course for affiliated students. Was only experimental and amounted to little.

Change Instruction" in Diet Kitchen to "experience" in Diet Kitchen.

Change fifth item to read, "All students given three months experience in Pediatric Department." This is important because even in 1922 all students were not given pediatric experience and I have had to write many an explanatory note about this when nurses wish to become registered in other states.

1923:

Omit reference to Miss Cutler's book. She was in Minnesota at the time. Several of our graduates have written books. Should not include this one and omit the others.

Change wording to the effect, "Affiliation with McLean Hospital renewed." Four students sent for a period of three months.

Change term "mental test" to "psychological test" for preliminary students.

1924:

Question vacation extension by one week.

Omit addition of all day Sunday. It was only once during the three years and as the student is off half a day anyway, we gave her half a day in addition. Not magnanimous enough for recording.

With one exception, policy of holding classes in the evenings discontinued.

CHRONOLOGICAL EVENTS

The following are suggestions. There may be good reasons for following them or just as good reasons for not following them. These suggestions have not been formulated to be consistent with the general setup.

1937:

Only addition to theoretical instructions, etc. Not of sufficient importance.
Only reference to that kind of leave per year. It was difficult to administer and we practically never use it.

I would include the organization of the summer for the purpose of increasing enrollment. There were the years when we had a desperate time in trying to get our quota of students.
I would add, "increasing affiliation from seven schools." This is interesting because many of those schools have now gone out of existence. Schools that were small enough to need affiliation for general experience ultimately gave up having schools.

1938:

Only establishment of a special course for affiliated students. Was only experimental and amounted to little.

Change instruction in Diet Kitchen to "experience" in Diet Kitchen.
Change fifth item to read, "All students given three months experience in Diet Kitchen Department." This is important because even in 1938 all students were not given practical experience and I have had to write many an explanatory note about this when named when to become registered in other states.

1939:

Only reference to Miss Galt's book. She was in Minnesota at the time. Several of our graduates have written books. Should not include this one and omit the others.

Change wording to the effect, "Affiliation with National Hospital removed." Four students sent for a period of three months.
Change term "mental test" to "psychological test" for preliminary students.

1940:

Question vacation extension by one week.
Only addition of all day Sunday. It was only once during the three years and as the student is off half a day anyway, we gave her half a day in addition. Not necessary enough for recording.

1925:

I do not get the point of second notation relative to "reduction." We did not give up the affiliations because our enrollment was increasing, but because the hospitals named were able to give the necessary experience at home. I suppose we did send students to McLean because our School was larger, but this has been already mentioned.

Leave out the note relative to Miss Giles in the Out-Patient Department. Taken care of elsewhere.

1926:

Leave out appointment of Physical-Social Director. Have included it in 1927 when she actually went on duty.

Take care of reference to Miss Giles by placing in 1926 "Appointment of public health nurse to teach preventive aspects of nursing in the Out-Patient Department."

We had a science laboratory before. This was the year that we acquired the former chemical laboratory. Note might read, "Remodelling of chemical laboratory into a science laboratory for the School."

Insert the word "True" before "waiting list."

Was this the time when the Childrens' Wards were renamed 10 and 12?

Omit "New" before neurological. We had had none before.

Which is the third item that has been replaced by the phrase "relative to teaching prevention?".

1927:

Fourth item - Place the word "Improved" before correlation. There never will be actual correlation in this School.

The year book is the seniors' year book and might read, "Publication of the first Year Book by the Senior Class."

First Physical-Social Director began her duties on February 1.

1928:

After "Assistant Superintendent" add "for study at Teachers College."

Do not understand the note relative to the resignation of Mrs. Thayer from the Advisory Committee. About this time she did resign as Chairman of the Ladies' Committee of the Advisory Committee and was succeeded by Mrs. Romans. I am sure she never resigned her membership.

1935:

I do not get the point of second notation relative to "redaction." We did not give up the affiliation because our enrollment was increasing, but because the hospital was able to give the necessary experience at home. I suppose we did send students to Melan because our School was larger, but this has been already mentioned.

Leave out the note relative to Miss Gills in the Out-Patient Department. Taken care of elsewhere.

1936:

Leave out appointment of Physical-Social Director. Have inserted it in 1937 when she actually went on duty.

Take care of reference to Miss Gills by placing in 1938 "Appointment of Public Health nurse to teach preventive aspects of nursing in the Out-Patient Department."

We had a science laboratory before. This was the year that we acquired the former chemical laboratory. Note might read, "Remodeling of chemical laboratory into a science laboratory for the School."

Insert the word "time" before "waiting list."

Has this the time when the Children's Ward was renamed IO and I?

Only "New" before neurological. We had had none before.

Which is the third item that has been replaced by the phrase "relative to teaching prevention?"

1937:

Fourth item - Place the word "improved" before correlation. There never will be actual correlation in this School.

The year book is the senior's year book and might read, "Publication of the First Year Book by the Senior Class."

First Physical-Social Director began her duties on February 1.

1938:

After "Assistant Superintendent" add "for study at Teachers College."

Do not understand the note relative to the resignation of Mrs. Tracy from the Advisory Committee. About this time she did resign as Chairman of the ladies' Committee of the Advisory Committee and was succeeded by Mrs. Hanna. I am sure she never resigned her membership.

July 27, 1930

1929:

Insert the word "Nursing" before "lectures" in Item #4.

Add "Upper Out-Patient Department Amphitheatre used for teaching of practical nursing."

1930:

Why end with graduate nursing staff? Student nurses went there in the beginning.

Why separate housing of graduates and students?

We should add, "Discussion of over-supply of nurses in this year."

1931:

At the end of Item #1 add, "for study at Teachers College, Columbia University."

Add "Establishment of Group Nursing in Baker Memorial."

Add "Unemployment among nurses."

1932:

Effects of the depression.

Add, "Value of graduate floor duty nurses demonstrated at the Baker Memorial."

Add, "Nursing personnel housed in eight different buildings."

1933:

Restate the aims.

Item #7 - "Anticipated changes in the five-year program."

Omit, "Improvements in the library."

Add, "Group nursing discontinued."

1934:

Omit, "Employment of small number of floor duty nurses."

Fourth line from the bottom, "Establishment of Simmons College School of Nursing which changes the former five-year course in affiliation with this School."

July 27, 1930

- 6 -

Dr. Washburn

1929:

Insert the word "Nursing" before "Nurses" in Item 44.

Add "Upper Out-Patient Department Ambulathetors used for teaching of practical nursing."

1930:

Why and with graduate nursing staff? Student nurses want there in the beginning.

Why graduate nursing of graduates and students?

We should add, "Displacement of over-supply of nurses in this year."

1931:

At the end of Item 44 add, "for study at Teachers College, Columbia University."

Add "Establishment of Group Nursing in Labor Memorial."

Add "Unemployment among nurses."

1932:

Effects of the depression.

Add, "Value of graduate floor duty nurses demonstrated at the Labor Memorial."

Add, "Nursing personnel housed in eight different buildings."

1933:

Restate the aim.

Item 47 - "Anticipated changes in the five-year program."

Only, "Improvements in the library."

Add, "Group nursing discontinued."

1934:

Only, "Employment of small number of floor duty nurses."

Insert line from bottom, "Establishment of Nurses College School of Nursing which changes the former five-year course in affiliation with this School."

1938:

Omit, "Addition of three floor duty nurses."

Add, and this item may be a very good finish, "Enrollment of Students numbers 289, the highest in the history of the school."

NOTE:

Look up the opening of Ward 4. On this ward was placed the first graduate floor duty nurses employed in the General Hospital. That is the beginning of a new development in hospital nursing.

I have probably added a few lines to these chronological sheets. I have also removed a few. Such a list is extremely valuable because it shows the development in nursing schools. It is valuable not only to us, but valuable to anyone who is tracing the history of the whole movement. The including of these chronological lists compensates for the fact that the number of pages in the text must be limited. Is this list and others like it to be printed in smaller type?

J:L

Sally Johnson, R.N.
Principal.

July 27, 1938

- 7 -

Dr. Washburn

1938

Only "Addition of three floor duty nurses."

Add, and this item may be a very good finish, "Enrollment of students numbers 269, the highest in the history of the school."

NOTE:

Look up the opening of Land 4. On this ward was placed the first graduate floor duty nurse employed in the General Hospital. That is the beginning of a new development in hospital nursing.

I have probably added a few lines to these chronological annals. I have also removed a few. Such a list is extremely valuable because it shows the development in nursing schools. It is valuable not only to us, but valuable to anyone who is tracing the history of the whole movement. The inclusion of these chronological lists compensated for the fact that the number of pages in the book must be limited. In this list and others like it to be printed in smaller type.

Sally Johnson, R.N.
Principal.

1:1

DEVELOPMENTS - SINCE 1920

Story of beginnings and end of five year course

Growth of Endowment Fund

Change in affiliations -

Discontinued

New

Physical-Social Director

Opening of Baker

Housing saga

Coming of floor duty nurses

Supplementary workers -

Ward helpers - ward secretaries - Red Cross Aids

Discontinuance of school for orderlies

Physical care of students - health preservation -

Serums - vaccines - x-rays - annual examinations - weight charts

Better prepared administrators and teachers

College credit

Growth in task of assembling credentials of applicants

Keeping abreast of new discoveries in medicine and preservation of health

Census - 1920 - 1900 - 1938

Personnel: Vaughan - Thayer - McGrae

Eight hour specials

Teaching curriculum three times a year

Nurses paid for by Massachusetts Unemployment Fund

Discontinuance of eighteen month course at McLean

Development of Student Co-Operative Organization

NOTE: Gray Book - list of graduates, probably done in 1939 -
gives occupation of graduates.

Continued reference to long hours of student nurses and their heavy working load

Beginnings of more careful selection - 1933 - Page 80

New courses in curriculum

Appointment of Instructor in Public Health Nursing - 1938

Ward 4

Serving of meals on wards transferred to the Dietetic Department

Change in Anesthesia Department

Effects of depression -

Over-supply

Eight hour day

Effect of "over-supply" of possible applicants

Growth in content of curriculum to meet rapid progress in practice of medicine:
curative and preventive - emphasis on teaching - new emphasis
on mental aspects and social aspects.

Trustees more conscious of assets and liabilities of the School

Need for students who are more mature and better prepared educationally

(Growth of junior colleges)

Advisability of a bookkeeping set-up which will separate costs of school from
the costs of nursing service.

1920

Annual Report -

Affiliations: Two new affiliations - one from Faulkner and one from New England Baptist.
Army School of Nursing withdraws affiliation.

Working Week: 52 hour week for day nurses established October 1919.
8 hour night duty established February 1, 1920.

Vacations lengthened from 7 to 9 weeks.

Elementary course in chemistry for those who have not had chemistry before admission.

NOTE: The graduation report given in January 1921 - report for the year 1920 - is not published in the Quarterly Record. An extract appears in Gray Book (list of graduates) published in 1920.

In Gray Book of 1920 - page 7 - a memorandum relative to physical changes.
States total gain in beds 48.
Shortage of applicants.

Census in January 1921, including preliminary students, equals 208 M.G.H. plus 20 affiliates, plus 33 graduates in the General Hospital. Phillips House not included. No Baker Memorial at that time.

On page 12 in the same 1920 Gray Book reference to lack of supervision on the wards and the location of class rooms.

(The above refers to the year 1920)

1921 - 33. Grad.
1921 -

Annual Report -

Second children's ward opened
 Supervisor in pediatrics appointed
 Standard Ward Inventories
 Public Health affiliation increased from 6 to 9 each year
 Started Schick Test and subsequent immunization
 Average number of days illness 7
 Addition of 9 days leave (per year)
 Incoming affiliations from 7 schools
 Census in General Hospital shows 30 graduate nurses, 140 M.G.H. pupils,
 53 probationers, 21 incoming affiliates, 4 postgraduates. 99 probationers
 admitted that year.

Miss Dolliver died August 11, 1921. See additional material in the
 Quarterly Record of December 1921, also in March 1922, March 1923 and
 March issue of 1928.

Quarterly Record (March issue of 1922 - reports the year 1921) -

Circularized the alumni and alumnae asking for recruits to school
 Appointment of the first assistant to the Theoretical Instructor (Miss Sleeper)
 On page 12 note our geographical spread
 On page 13 summary of Miss Dolliver's work

Annual Report -

Publication of Miss Parsons' history - profits to go to the Endowment Fund of the Training School for Nurses.

Employment of ward helpers (Page 121) 9 in number.

Affiliations: Choate withdraws

Children's transfers to the Peter Bent

The group from McLean increases from 6 months to 8 months

Classes in posture

Longer period in Pediatrics for all (3 months)

First five year student graduated

Diet Kitchen experience given to all

Surgical Dressings Committee (Women who have been interested in this kind of work during the War) made 96,000 dressings.

The graduation report given in January 1923 reports the year of 1922. It appears in the Gray Book dated 1921 - 1922.

Page 16 refers to demands on the school

Operating Room transferred from Ward I to the Amphitheatre

3rd Surgical Service

1923

Annual Report -

Celebration of 50th Anniversary: Banquet - Evening meeting in the Old South Meeting House. Address by Dr. Winford Smith. Alumnae banquet, etc. Full report in the December issue of the 1923 Quarterly Record.

- Publication of "Procedures in Practical Nursing" by Miss McGrae
- New England Baptist Hospital withdraws affiliation
- Renewal of affiliation with McLean; that is, sending our students there
- Course is Psychology
- Began giving mental tests to the September class of 1923
- Extension of heating and sanitation in the Thayer
- Added fifth floor to the Walcott House
- Time allowance to college graduates
- First mention of more definite program for maintenance of health
- Increased recreating and social activities
- No. 3, 5 and 7 North Grove Street House vacated
- Sally Johnson appointed Superintendent of Nurses at the Eye & Ear Infirmary

Quarterly Record -

Review of the school by "S.J." given at mass meeting of the 50th Anniversary
found in the December issue of 1923.
Outline of Miss Parsons' accomplishments
Quarterly Record of March 1924 gives graduation report which reviews 1923
Paragraph leading to need of Social Director found on Page 7
Nurses housed in the Phillips House removed

$$\begin{array}{r} 15731 \\ 1948 \\ \hline 1943 \\ 1873 \\ \hline 70 \end{array}$$

1924

Annual Report

Mentions "positive health" -- facilities for recreation and time to use facilities
Increased ward helpers, 9 to 15
With one exception eliminated all evening classes
Quarterly weight charts
Second full-time secretary
Holyoke withdraws affiliation--Melrose and Quincy open affiliation
Students affiliating for Obstetrics at Faulkner and Wesson Maternity in Springfield - all sent to B. L. I. where course is reduced to 3 months
Third supervisor appointed--dividing upper wards
In process of remodeling medical wards

Quarterly Record (March issue of 1925 - reports the year 1924)

Paragraph 4 on "Growth of School"
Difficulty of the work - pp. 4 & 5
Reference to need of physical-social director
First reference to need of emphasis on public health nursing and the need for a nurse to do this

1925

Annual Report

123 students admitted

Only affiliates - McLean, Faulkner and Quincy

Emphasis on ward teaching

Checking system on ward procedures

Miss Giles, Head Nurse in O.P.D., goes to the Yale School and begins work in the O.P.D. emphasizing the prevention aspect in that department

Elective at Boston City Hospital--2 students sent there for three months (total of 6 through the year)

Part II - Miss McCrae's "Procedures in Nursing" published

Quarterly Record (March issue of 1926 - reports the year 1925)

Census of students - 222

Reference to long hours - pp.4 & 5

A page on the demands made

1926

Annual Report

Remodeling of surgical end of Bulfinch
Connecting building with the Eye & Ear
On June 1st - 70 students enrolled for the following September
On November 1st - 50 students enrolled for the following February
28 students are in the Mumford House - Charles St. near Cambridge
Remodeled children's wards - 41 beds
Opened neurological ward - 24 beds
Appointment of Public Health nurse in O.P.D. to help with supervision of the clinics and teaching the student nurses in the clinics
Science laboratory made for the school from the old Chemical Lab.

Quarterly Record (March issue of 1927 - reports the year 1926)

On page 9 - plea for physical-social director
pp. 12 & 13 - reference to work of Alumni

1927

Annual Report

With one exception the entire curriculum taught twice a year
Physical-social director began February 1927
Seniors published first year book
Reference to adequate supply of applicants
Second graduate head nurse in Pediatrics

Quarterly Record (March issue of 1928 - reports the year 1927)

Bottom of page 19 - an interesting paragraph showing that
182 students are placed throughout the hospital before any
are assigned to day duty of the General Hospital *Wash.*
Annual health examination inaugurated
Picture of task of administration - page 11
43 teaching in the school
16 graduates are at Teachers College, Columbia--more than from
any other school
List of important positions held

1928

Annual Report

Mentions 46 nurses in Charles Street, 28 Mumford, and 15 in old flats
Miss Dennison on leave
Changes in sterilizing room
Former house officer presents new medical beds
Third office provided for the Training School

Quarterly Record (March issue of 1929 - reports the year 1928)

page 7 - first reference to over-supply and necessity of right kind
of applicant
Need for better prepared head nurses, etc.
Material on Miss Maxwell on page 11

1929

Annual Report

3 added to the personnel--Assistant to Miss McCrae, Assistant in the Operating Room, Assistant to Miss Campbell in the Out-Patient Department. (Was this the time the connecting building was built?)
Miss Jane Mesick, Dean of Simmons College, added to the Advisory Committee of the Training School--first person representing an educational institution
6 formal lectures given in Public Health Nursing
Mrs. Vaughan presents the school with statuette of Florence Nightingale
Review of the report of the Grading Committee

Quarterly Record (March issue of 1930 - reports the year 1929)

Review of work of Grading Committee
Use of Upper Amphitheatre for teaching nursing
Review of activities of physical-social director
On January 26, 1930, (this is the correct year) the number of graduates of the school was 1,960
A review of the activities of the graduates

Note: Alumni ^{cl} has appointed a committee to assemble material for the printing of another Gray Book; the hospital will print this. If done next year, will be a decade since the last was done.

Annual Report -

Miss Nelson, Physical-Social Director, succeeded by Miss Mary Murray
First patient in the Baker March 1st. By March 21 there were 70 patients
On Page 58 statement relative to value of the Baker Memorial as field
experience.

Housing of 50 students in the Baker who had formerly been in the Mumford
House on Charles Street which had been rented since 1926.

Developing of library from a room designed for a sewing room and also
used for the teaching of massage and bandaging.

Additional lavatory facilities in Charles Street

Sprinkler and lighting system added to Thayer

Every probationer has x-ray of the chest

Pages 59 and 60 seem to be rather "strong meat"

Quarterly Record -

March 1931 reviews the year 1930. Page 6 reference to the report of
the Grading Committee

Quotation relative to long hours -- short time spent in the dining room

(I seem to be anxious to explain our shortcomings)

Second assistant superintendent of nurses

Further note on Physical-Social Director

Miss Knapp Dean of Freshmen and Sophomores at Wellesley

In 1930 New Home renamed Walcott House

Still discussion of over-supply

1931

Housing: Three in a room in several of the rooms at Charles Street
60 nurses living outside the Hospital

NOTE: Page 64 - the last 11 lines
Page 65 - relative to Miss McGrae

Quarterly Record -

March 1932 issue reviews the year of 1931

Report of Helen Wood

Page 5 reference to Baker experience

✓ Group nursing

General duty nurses

Housing of nurses in Baker

List of changes made during the years Helen Wood was away

5th line from bottom of Page 5 - "Any school, etc." - through first
paragraph of Page 7.

Mention of unemployment

Reference to Miss McGrae

1932

Annual Report -

Housing: 53 students who live three in a room
90 who live two in a room
Reason why above is undesirable, Page 60

Report rather strong talk!
Lack of reception rooms, Page 61
Difficulty of finding time for class room teaching, Page 62
Practice in Bakes - last half of Page 62
Reference to value of graduate nurses - Page 63
Page 64 - statement as to needs of school

Quarterly Record -

March issue of 1933 reviews year of 1932
Nursing personnel housed in 8 different buildings
Reference to Physical-Social Director - Page 9
Effects of depression
Reference to need of supplementary experience to that received at home
Placement of students
Unemployment Fund gives a second contribution - first one being \$1500
Review of "learnings" during my years of absence
Reference to needs of this school
Page 13 - paragraph on what school does for the hospital

Annual Report

Census end of November, 1933, 2281 graduates of the school
 Paragraphs state geographical location of the students in
 56 forms of nursing
 Two small social rooms evolved from bedrooms of Walcott House
 Reference to working conditions and long hours
 Beginning of more careful selection of students - Page 80
 A course in Ward Administration given at Simmons College
 during the school year as well as in the summer
 Reference to case method as against the functional methods
 as to care of patients - Page 83
 Housing - North Grove Street - Page 84 - needs and cost

Quarterly Record (March 1934 reviews the year 1931)

Statement of aim of school with interpretation of those aims
 Limitation of housing
 Long hours
 Beginning of more careful selection of students with the
 result lowering of census of the school
 Page 25 - too heavy nursing load
 Page 25 - Extent of 5-year program.
 Discontinuance of group nursing
 70% of the graduating class earning living at M. G. H. and
 at Eye & Ear Infirmary
 Page 26 - Demand of increased preparation of those who are
 to occupy positions at higher levels
 Reference to over-supply
 Point made relative to retention of boarder line students
 (June issue of 1934 - material of Miss McCrae)
 March issue of 1934 article on changing organization of
 school at Simmons College

Quarterly - September 1934

Article on Mrs. Vaughn
 Also statement relative to Miss McCrae's retirement. Her
 leave of absence began February of 1934. Went to the
 Pioneer Club to live October, 1934. Still considered on
 leave until September 1, 1935 when she retires.
 In December issue of 1934 - article on Mrs. Thayer
 Same issue - article on the 8-hour day

Annual Report

Death of Mrs. Vaughn and Mrs. Thayer

Eight-hour day for special nurses - six months trial
beginning in May, 1934 - became permanent November, 1934.

Male students accepted for affiliation from the McLean
Hospital.

Psychiatric unit - Dr. Cobbs - open September 17, 1934.

Small number floor duty nurses in the General Hospital

Serving of meals of the major wards transferred to the
Dietetic Department

Number of students admitted reduced 10%

See vote to establishment of 8-hour day for specials on
Page 61

Course for orderlies discontinued

Group of McLean men students coming for period of year
arrived on October 1st - 11 in number

When number of men and women students came from McLean
increased, we increased the number of students going to
McLean from 4 to 10, sent three times a year. Began
October 1, 1934.

Faulkner affiliates withdrawn

Four floor duty nurses added to the General Hospital

Reasons for change to Dietetic Department service in wards
on Page 66 or thereabouts

Change in Department of Anesthesia - Page 63

During this year 87% of graduating class absorbed by M. G. H.
and Eye & Ear Infirmary

Change in organization of Simmons College - Page 64

Miss McCrae - Saunders Medal - Page 65

Mrs. Vaughn died August, 1934

Mrs. Thayer died September, 1934

Ladder House for men students remodeled

The third student removed from nine rooms at Charles Street ✓

The request for need of better housing - Page 67

Opening the 4th floor of the Baker

Transfer of Ward 26 to the Baker

80 nurses turned out from the Baker Memorial to be housed
elsewhere - many of them given room allowance

Statement as to inadequacy of library

Quarterly Record (March, 1935) Reviews the work of 1934

Average number of students with the preliminary 289

January, 1934 - appointment of supervisor of housing and

lay personnel, in part made necessary because of the endless
shifting and changing to house the increased personnel at the
Baker and the living out problem

Minor changes in physical setup

Paragraph on the changing of serving meals on the wards

Re-organization of the Department of Anesthesia

Ward 26 - opened September 12, 1934

Paragraph on Physical-Social Director, 8-hr day for specials -
re-organization at Simmons College

Material on Miss McCrae, Mrs. Vaughn and Mrs. Thayer

1935

Annual Report

Second assistant at night

Official retirement (not leave) of Miss McGrae September 1, 1935

Appointment of Martha Ruth Smith to succeed Miss McGrae

Three floor duty nurses added

Red Cross hospital volunteers

The discussion of unemployment frightens off hospital applicants

Appointment of certain members of the graduate nursing staff as advisors to the students

Those seeking candidates for the higher positions are requiring better academic preparation

Training School Committee divided into small working committees and - and this year in 1935 we are housing nurses in ten different buildings

In 1935 paid room allowance to 136 graduates living outside

Note: Before remodeling Parkman Street house, we reached 180

Quarterly Record (March, 1936 reviews the year 1935)

Graduating class of 1934 numbers 94, the largest in the history of the school

Note: Italics in this report are very annoying. The copy of which I read at graduation and in which the words are underlined for emphasis were sent to the printer. The printer set these words up in italics and whoever read the proof, did not take care of these italics.

A paragraph in this report on over-supply plus our own developments which will tend to absorb the group

Appointment of advisors

Red Cross hospital aids

Page 8 - preparation of staff

Page 9 - list of physical changes

10 homes or parts of hospital where nurses lived in 1935

146 live outside

Paragraphs on Miss McGrae

Annual Report -

Advisory Committee to the Training School divided into sub-committees
 School year in trimesters - all courses after the preliminary course
 taught three times a year. Reasons: Greater ease in adjustment to
 affiliated program - Closer correlation - Wider spreads in vacation
 periods - Fewer classes for individual student per week - Fewer
 students off wards at one time - Classes smaller.

Increase in floor duty

An assistant head nurse on Ward C-D

Resignation of Miss Pohe and Miss Reilly

The supervisors out on the wards, doing less "covering" in the Training
 School Office and therefore closer supervision of the wards.

Martha Ruth Smith (successor to Miss McCrae) sets up "Ward Nursing
 Practice Mammel".

Change in relationships with Simmons College - We had 10 affiliates
 arrive in January 1937 who were affiliated students from the newly
 organized Simmons College School of Nursing - Five year students on
 the old plan and graduate nurses taking course at Simmons College
 come to this Hospital for experience in head nursing and assistant
 instructor experience.

Trend toward increased relationships with frankly educational institutions -
 Page 58.

Conflict between nursing education and nursing service and position
 of hospital in this situation.

Major needs: Reduction in the heavy load of nursing service which
 students must carry.
 Decrease in the number of hours on duty
 Extension in affiliations
 Increase in number of head nurses and supervisors
 Courses to be approved and added
 Students appointed on the basis of fitness for nursing
 rather than of the need for hospital workers.
 Hopes for the future are more students with adequate
 basic education and social maturity.

Reference to an Endowment Fund - Page 61

Arrangement with Simmons College: ^{giving the} 1½ years credit for graduates coming to us
 from their school.

Quarterly Record -

March 1937 issue reports year 1936

Contribution of students as individuals

Observation of our own graduates and the reason

Census of the School reduced 13% - Partly influenced by the fact that no
 students were admitted from Simmons on the five year basis. Under the
 former plan they became members of our School. Number often admitted, 12.
 Addition of 14 floor duty nurses, the cost of which would be practically
 the same as the cost of the maintenance, uniforms, books, etc. of the
 students not admitted.

Paragraph on Physical-Social Director

Two college Deans on the Training School Committee

Legacy for nurses home

Page 8 - paragraph on Simmons College

College credit to our students given by Simmons College

Page 9 - reasons why we may expect an endowment for our school

1937

Annual Report -

Cataloguing of the library
Appointment of a librarian
Study of the School with recommendations made by Miss Sleeper
Increase in ward teaching
Remodeling of Parkman Street House
First group of reorganized Simmons College School of Nursing students
finish their year's affiliation, coming January 1937 and leaving January 1938.
Paragraph on extra-curricular activities
Credit given by Simmons College to our graduates who had two years of
college before coming to this School of Nursing

Quarterly Record -

March 1938 issue reviews the year of 1937
Number of graduates including specials, x-ray, anesthetists, Admitting Office,
etc., is 450.
First paragraph on Page 5, restatement of the advanced standing at
Simmons College.
Pages on developments in the school methods
Work with the library
Page on Physical-Social Director
The key sentence on the value of The Student Nurses' Cooperative
Association is the last sentence in the second paragraph on Page 9.
Contribution to nursing literature
Paragraph on Miss Hall

Needs of the School: next to the last paragraph on Page 6.

Page 10, second paragraph, should have been 2200. Note: Is time for a *renew*
careful addition of
our graduate body.
*This was done
Feb 7 1939*

November 15, 1935

TO: Dr. Faxon, Director of Hospital

FROM: Sally Johnson, Principal of Training School for Nurses

RE: Developments that call for additional money expenditures within the school of nursing.

1. In my opinion one of the two most important additional expenditures is set forth in a "special communication" submitted elsewhere.
2. The other of these two is the relief of the pressure of nursing service on the wards in order that there may be a better nursing service and a better ward situation for that part of nursing education which takes place on the wards. This development is also being considered elsewhere.
3. The third important development to be considered is primarily a contribution to the better preparation of nurses for service in the community. Its contribution toward better nursing service to the patients in the hospital will be secondary. To say this another way, the main purpose of this development would be nursing education for better nursing service in the community rather than better nursing service in the hospital, although that too will be improved. I refer to the

Employment of a well prepared public health nurse on the teaching staff of the school.

An outstanding criticism of hospital schools of nursing is that they do not adequately prepare their graduates to serve in the community. Hospital schools do make a real effort to add to their staffs, and to their curriculum, those persons and those teachings that will better serve the patients in their hospital beds. It is no exaggeration to say that practically nothing has been done in the average school of nursing for the express purpose of supplementing the knowledge and skill which the nurse needs in her work on the hospital wards for the purpose of better serving the patient out in the community.

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Our school has done more along this line than the "average" and yet I can think of only the following: two classes on nursing in the home, two on use of home equipment, and a series of six lectures on community aspects of health conservation; excursions to such institutions as Prndergast Preventorium, Jordan Marsh Health Unit, Dennison House, and Long Island Hospital. In addition there are two questions on case studies, "What could this person have done that might have prevented this illness?" and "In addition to answers just given what can this patient do that may hasten his convalescence and prevent recurrence?"

Today great stress is laid on the preservation of health and the prevention of disease. Preventive medicine is attempting to lessen the need for curative medicine. Nursing education must follow the trend of medical education. The emphasis in nursing education, therefore, is changing.

If our graduates are to follow this new trend they must have the attitude, knowledge, and skills which will make them efficient health workers. Very little of this attitude, knowledge, and skill is found in the hospital school of nursing. If searched for and interpreted by a public health nurse all three would be found to some degree. What but the preservation of health and the prevention of disease is our program of health examinations and prophylactic measures of the incoming classes?

Then too such a worker would put her finger on the weaknesses of our health practices for older students. She would think about our lighting in the students rooms and in the class rooms, our heating and our ventilation. She would look after some of the things that Miss Foster looks after at Simmons College. (Miss Foster is our graduate who is the public health nurse at Simmons College). Of us she would ask, "How do you expect your students to leave the wards at eight a.m. when ward pressure is at its height to go to the Emergency Ward for health teaching or prevention. These students may go when they are too ill to continue work, but not otherwise;" and again she would ask, "Do you think they will report at the first sign of trouble when they must sit around in the Emergency Ward situation where all who pass may say "What ails you?"

Certain phases of health teaching are to be found in the courses taught, but few of us recognize these phases because we have not been brought up health conscious. The well qualified public health nurse would make us more conscious and we who are teaching would develop our latent abilities as health teachers.

This worker would survey the content of every course taught and point out the place for health emphasis and point out the community aspect of the subject under consideration. Every few weeks pamphlets come from various health agencies containing information which these agencies attempt to teach the people. Is this knowledge in our curriculum content? A public health nurse would see that it got into the curriculum.

Some one will say that this public health point of view, this attitude, knowledge, and skill for teaching health should be obtained by means of a postgraduate course. To a large extent that was true a decade ago and today the specialist

Our school has done along this line the "average" and yet I can think of only the following: two classes on nursing in the home, two on use of home equipment, and a series of six lectures on community aspects of health conservation; excursions to such institutions as Presbyterian Hospital, Jordan Marsh Health Unit, Boston Home, and Long Island Hospital. In addition there are two questions on each studied, "What could this person have done that might have prevented this illness?" and "In addition to answers just given what can this patient do that way hasten his convalescence and prevent recurrence?"

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Then too with a worker would not pay to pay on the weakness of our health practices for their students. She would think about one lighting in the student room and in the class room, the heating and air conditioning. She would look after some of the things that Mrs. Foster looks after at Simmons College. (Mrs. Foster is our graduate who is in the public health nurse at Simmons College). Of us she would say, "How do you expect your students to leave the words at eight and when your program is at the height to go to the emergency ward for health teaching or health. These students may go when they are too ill to continue work, but not otherwise," and again she would say, "Do you think they will report at the first sign of trouble when they want to around in the emergency ward situation where all who pass may say 'What else you'?"

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in public health, as in obstetrical or pediatric nursing, must be developed through postgraduate courses and experience. But, at present, every well prepared nurse must be prepared, to a degree, to be a public health nurse just as she is prepared, to a degree, to care for the obstetrical patient and the sick child.

Whether we like to face it or not, the hospital, the physician and the nurse must add to their function of the prevention of illness and the preservation of health. This the lay person expects from the hospital, the physician and the nurse. Every day sees in this institution the teaching of patients relative to diet, taking of insulin, care of colostomy, making of formulae, and the doing of Berger exercises. Many a physician's interview ends with, "The nurse will explain that". Many a bewildered patient says, "Miss Smith, will you tell me what the doctor meant. I did not understand and I did not want to ask over."

Several of the schools who are abreast of this newer trend already have such a worker on their staffs. Without taking time to look further into the matter, I know that such a worker is on the staff at the New York Cornell, Johns Hopkins, Yale, and the Western Reserve. It is interesting to know that the workers at the last two named are our graduates. Within a month Yale has approached another of our graduates for this form of work.

What have we done if anything about this need? The following is the story.

We began doing something about it ten years ago. In November 1925 we had as head nurse in the Female Surgical Out-Patient Department a young woman who had had the four months' undergraduate course in public health nursing. We released her for a visit (I think three weeks) to the Yale School to observe their teaching in the Out-Patient Department. At first a student nurse replaced this worker in the Female Surgical, but later a graduate was placed there. This public health nurse who had visited Yale returned to be the supervisor of clinics. She made a survey of the clinic content which a student nurse should absorb, taught the nurse how to set up the clinic, required one case study in each clinic, gave a history of the Out-Patient Department, and was responsible for excursions made to other institutions. At first this public health nurse was paid the salary of a head nurse, later it was increased to \$100.00.

In October 1928, three years later, this nurse left us to continue her public health preparation and was succeeded by a college graduate who had had a four months' postgraduate course in public health, plus about six years of experience. She was paid \$110.00. After a little less than three years, August 1931, she too left us to become a member of the staff of the District Nursing Association in Providence. Then followed a few months in which, so far as I remember, we had no worker. On January 2, 1932, Miss DiCicco, a graduate who had had the four months' undergraduate course, plus two months' graduate course, and about ten years experience,

in public health, as in obstetrics or pediatrics nursing, must be developed through postgraduate courses and experience. But, at present, every well prepared nurse must be prepared, to a degree, to be a public health nurse just as she is prepared, to a degree, to care for the obstetrical patients and the sick child.

Whether we like to face it or not, the hospital, the physician and the nurse must add to their function of the prevention of illness and the preservation of health. This the lay person expects from the hospital, the physician and the nurse. Every day news in this institution the teaching of patients relative to diet, taking of medicine, care of colostomy, history of families, and the doing of better exercises. Many a physician's interview ends with, "The nurse will explain that", many a paralytic patient says, "Miss Smith, will you tell me what the doctor meant. I did not understand and I did not want to ask any."

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was appointed. Her salary was \$110.00 for one month and then to the cut which was \$96.92. She was not very well and in April 1934, a definite diagnosis of tuberculosis of the lungs was made and she went off duty. We did not have the heart to ask for her resignation and it was nearly a year before she volunteered to give it. Because of her status we obtained no other public health nurse, but some of the work has been carried since by a young graduate at the salary of \$77.07 per month. This young woman has had no public health work but has done very well assisting in the clinics.

No one of these workers has done exactly what we wanted done. There are two major reasons for this: the salary did not attract the worker adequately prepared to see and fill the need, and the administration of the clinics and the nursing service in these clinics claimed her time.

When all this was discussed with Dr. Bigelow in the summer and fall of 1934, it was decided that we would make no change until we could have a fully prepared person. It was agreed that we should put into the budget an additional salary expenditure of about \$57.00 per month, beginning September 1935. For obvious reasons this plan was never executed.

Because of the administrative pressure and because the person who has carried on during the last year and a half has been less well prepared to do the public health work she has done more of the clinic administration. Therefore, if this person were replaced by a fully qualified public health nurse who did the other things indicated she would aid the administration of the clinic less. Therefore, the question of making this change is not only the expenditure of the difference between the salary of the qualified nurse and the fully qualified nurse, but the expenditure of getting the work in the clinics done. It is my opinion that a person on part time could take up that work laid down. However, a recommendation relative to that would need to come from Miss Campbell.

Estimated expense:

1. Difference between \$1163.04 (now authorized but not paid) and \$1680.00 (\$148.00) $\$1163.04 - \$1680.00 = \$517.00$
2. One half time worker in Out-Patient Department, \$480.00 plus lunches.

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No one of these workers has done exactly what we wanted done. There are two major reasons for this; the salary did not attract the worker adequately proposed to her and fill the need, and the administration of the clinics and the nursing service in these clinics delayed her time.

When all this was discussed with Mr. Higdon in the summer and fall of 1934, it was decided that we would make no change until we could have a fully prepared person. It was agreed that we should put into budget an additional salary expenditure of about \$37.00 per month, beginning September 1935. For obvious reasons this plan was never executed.

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Estimated expense:

1. Difference between \$110.00 (now authorized but not paid) and \$120.00 (\$120.00 - \$110.00 = \$10.00)
2. One half time worker in Out-Patient Department, \$400.00 plus insurance.

4. Need of a fund, perhaps \$250.00, that could be used for special lectures on subjects that cannot be covered by persons on hospital staff. Examples: Social Hygiene - Nutrition and Public Health - Private Duty - Jurisprudence - Personality Development - Voice and Diction - A nurse in the private school, camp and industry - A lay employer of the private nurse - Occupational therapy for the orthopedic patient (a worker comes down from the Robert Brigham Hospital) - Child Psychology or Guidance - A speaker from a nursery school.

NOTE: Expense for the above would be comparatively minor if it were not for the necessity of repetition because all students of classes not available at once (because of ward situation or affiliation).

4. List of a list, perhaps 2500.00, that could be used for special features on exhibits that cannot be covered by persons on hospital staff. Examples: Social Hygiene - Nutrition and Public Health - Private Duty - Jurisprudence - Personality Development - Voice and Diction - A nurse in the private school, camp and industry - A lay employer of the private nurse - Occupational therapy for the orthopedic patient (a visitor comes down from the Robert H. L. Hospital) - Child Psychology or Guidance - A speaker from a nursery school.

NOTE: Expense for the above would be comparatively minor if it were not for the necessity of visiting because all students of classes not available as once (because of need situation or affiliation).

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23

Massachusetts General Hospital

Boston

June 10, 1939

NATHANIEL W. FAXON, M.D.

DIRECTOR

TRAINING SCHOOL FOR NURSES

SALLY JOHNSON, R. N. PRINCIPAL

MEMORANDUM

TO: Dr. Faxon

FROM: Miss Johnson

RE: Need for a teaching room on the floor.

An outstanding need in present day nursing education is that of ways and means by which ward teaching can be evaluated and measured and therefore count as a definite part of the curriculum. Student nurses put in literally years of time on the wards, valuable of course, but there has been little organization of their learnings and little credit of a kind which can be measured in a way acceptable to educational institutions. Some students have learned much, some little. We need to see that this teaching "takes."

For such teaching the students can be taken off the wards for only very short periods, usually twenty minutes. At least five minutes of this time would be consumed in getting to and from a basement classroom. Records cannot be carried off to a basement classroom. A ward class room is accessible to house officers and residents who may stop for a few minutes of interpretation. A teaching room makes the ward teaching seem important to students. It gives a teaching atmosphere and emphasizes to the head nurse her responsibility as a teacher. A place for assembling teaching material. A place away from the patients who listen to the discussion. One or two persons are left on the ward to keep the ward going when the others go into the classroom. If they are out in the ward they feel that they too must respond to the lights although the two assigned to this work could perfectly well meet the needs. Students in a teaching room on the floor are readily available if the nursing load all of a sudden picks up. There is great need for individual supervision and teaching because the student nurses are young and they are getting their basic preparation in the situation.

There is a special need for a teaching room on the psychiatric floor because we need to use this department for a number, at least, of student nurses who cannot go to McLean.

Possibilities:

On the second floor Dr. Means had hoped that we could use one of the kitchens for wheelchairs and trucks. Would it be possible for us to have one of the kitchens for a teaching room, put two trucks at the end

June 10, 1939

of the corridor, one at either side which can be done and make a reasonably good appearance, name definite places for the wheelchairs, and then take off a strip at the south end of the students' laboratory in which we could line up wheelchairs? Could we not get on with a smaller medical student laboratory? On the west end of the second floor I think we would try to get on with the examining rooms.

On the third floor I am sure that there could be squeezed out a teaching room in the center back where there are now five laboratories and two dark rooms; then at either end of the third floor we would try to get on with the space around the head nurse's desk, as that is out of the ward proper, and with use of the examining rooms.

To summarize:

We are asking for a teaching room in the east end of the second floor and in the center of the third floor.

J:L

Sally Johnson, R.N.
Principal.

MASSACHUSETTS GENERAL HOSPITAL
TRAINING SCHOOL FOR NURSES

Memorandum:

To: Dr. Faxon
From: Miss Johnson

I do not entirely agree with a statement, "The nurses are the ones who benefit most," except that a nurse who is a better nurse finds that state beneficial to herself. The accrediting program rightly administered should improve the nursing care of the patients and the status of the school. The higher the status of the school, the higher the standing of the hospital. Therefore, I believe that this expenditure to be a legitimate one for the hospital. Within a few days I said to Miss Sleeper, "Now what were the things the accrediting visitors unearthed and what have we done about them." If the accrediting continues to be done on the level started and by women of the present level, the process is a form of postgraduate course or institute for the school's personnel.

It is far more difficult for the nursing organizations to finance this program than it is for the medical associations as the men's organizations have more money. Generally speaking men in the professions have more money than women in the professions. The men's colleges have more gifts than women's colleges. The men's colleges are better supported by the alumni than women's colleges. The reasons are obvious.

Granting that the medical man's preparation costs him far more than the education of the nurse costs her, the medical man can charge on a sliding scale. The private duty nurse who is out one day receives the same as the nurse who has been out twenty years. The sliding scale works for only the instructors and administrators and many of them have spent considerable amounts of money on their education after graduation. It is this small group of instructors and administrators who are in the League and who are trying to carry on this program.

To a very large extent it is the nursing organizations and their literature which have been responsible for the improvement of nursing in our hospitals - keeping it to the level where it can help the medical profession with its advance in medical science. As long as schools are part of the hospital, I feel that a fee for accrediting is a legitimate expenditure of the hospital for it improves its nursing service and its nursing education.

150 money dues to Association American Medical Colleges -
Some for 15 years -
Was not from somebody.
Does not know original reg. fee.

W. D. (1939)
Anchman
State College

Amundson 7 p. 11/11/39

25
D. W. Winslow
Prof. Cells
New Eng. Colls
New Eng. Colls
Assoc. of Colleges
Assoc. of Colleges
Assoc. of Colleges

At a meeting of the ^{Trustees' Comm}~~General Executive Committee~~,
held on ~~October 9~~, 1940, it was
"

VOTED: To support the request of the Director
of Nursing to change the ^{name of the} Training
School for Nurses" to "Massachusetts
General Hospital School of Nursing".

Approved by Trustees

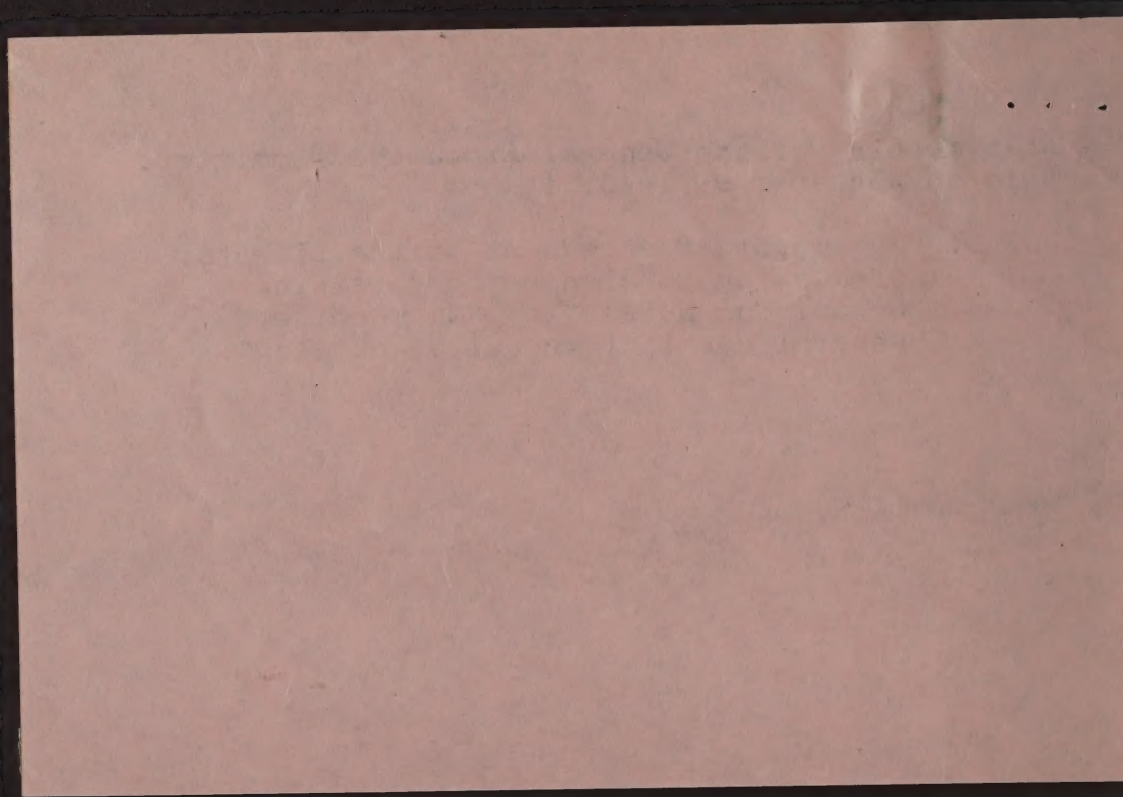
Approved

Historical

Oct 18, 1940

To Trustees

NWZ



T.C.

Massachusetts General Hospital Boston

93.A

NATHANIEL W. FAXON, M.D.

DIRECTOR

TRAINING SCHOOL FOR NURSES

SALLY JOHNSON, R. N. PRINCIPAL

October 4, 1940

MEMORANDUM

To: Dr. Faxon
 From: Miss Johnson
 Re: Changing the name of the school of nursing from
 "Massachusetts General Hospital Training School for Nurses"
 to "Massachusetts General Hospital School of Nursing."

Attached are the reasons why we wish to change the name. What are the procedures for obtaining action upon the recommendation? I have already discussed the matter with the ladies of the Advisory Committee, and they are of the opinion that the change would be in the line of progress. The usual procedure would be to bring the matter up with the entire Advisory Committee to the Training School. However, I have not yet worked up material for a meeting of that entire committee, and it will be some time before I shall get such material together. I should like to have the authority to change the name before we have such a meeting because we must soon get out a new school circular and because the Alumnae Association is in the process of drafting a new constitution and by-laws, in which the name of the school appears.

If the matter were brought to the attention of the trustees, the three members of the Trustees Committee on the Training School - Miss Dumaine, Dr. Davis, and Mr. Dunn - would, of course, be included. (It has just occurred to me that Miss Dumaine was not at the committee meeting last Monday morning when this subject was brought up.) The three members who do not know about the recommendation are Drs. Churchill, Means, and Higgins.

SJ:MA

Sally Johnson
 Sally Johnson, R.N.
 Principal

Since dictating the above I have sent copies of this memorandum to Miss Dumaine who is now Chairman of the Trustees Committee on the Training School.

ADVISABILITY OF CHANGING THE TITLE OF THE SCHOOL
FROM MASSACHUSETTS GENERAL HOSPITAL TRAINING SCHOOL FOR NURSES
TO MASSACHUSETTS GENERAL HOSPITAL SCHOOL OF NURSING

Name "School of Nursing" Widely Used.

We recently looked through a pile of nursing school circulars which we had on hand. There were twenty-three, and, to our amazement, all but one used the title "School of Nursing." The word "training" did not appear on one title. The new schools and those which are a part of colleges and universities have, from the start, used the title "school of Nursing." But in the list were many schools which have probably changed their names, and I suspect that some changed them without a vote of the Board of Trustees. In this list of older schools which probably were christened "Training School for Nurses" and which have now changed to "School of Nursing" are: Childrens, Bellevue, New York, Rhode Island, McLean, Faulkner, Presbyterian in New York, Presbyterian in Chicago, Burbank, Cooley-Dickinson, Alleghany General, and Michael Reese. I believe that the Johns Hopkins school, although also an older one, was, in the beginning, called "School of Nursing". In the case of the McLean Hospital school, the name appears to have been changed in 1924. Miss Atto can find no record of any official action by trustees or any other board.

Reasons for Change

The word "training" suggests learning through repetition without understanding those basic principles that underly nursing or those basic principles that make adjustment to new situations possible.

It is true that graduate education today is again using the word "training," which connotes practice, but in the sense of practice with an understanding of the basic principles. The word "training" as used in nursing connotes not practice with understanding of basic principles but rather learning through drill.

Therefore, the word "training" used as a part of a title of a school implies that in that school the main method of learning is by drill or repetition.

Actually, the methods of learning in this school include all those which lead to understanding: namely, problem-solving methods such as discussion, laboratory, excursions, conferences, referende reading, nursing care plans, and nursing care studies. Therefore, our title should indicate this more inclusive program.

Also, the term "School" suggests more than a higher method of learning. It suggests a prepared faculty, good teaching facilities, well balanced curriculum, good living conditions, a guidance program, and a student-activity program. These, too, our school offers.

For these reasons we believe the title should be changed from: "Massachusetts General Hospital Training School for Nurses" to "Massachusetts General Hospital School of Nursing."

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EFFECT OF A CHANGE OF NAME ON CERTAIN OFFICIAL DOCUMENTS,
AND IN CERTAIN PRINTED MATERIAL

1. The "Deed of Gift," which relates to the Endowment Fund held in trust by the trustees, uses the name "Training School for Nurses." It would have to be changed here.
2. The engraving on the back of our school pin reads: "M. G. H. Training School for Nurses, 1873." Smith Patterson will change this without cost.
3. A new plate would be necessary for our diploma, as the name there is "Training School for Nurses." I have long wished for a cut of the Bulfinch Building on the diploma, and if it were included in a new diploma, it would add to the cost. Our last plate cost \$70.
4. There are certain other places where names would need to be changed; for example, The Ladies Committee on the General Hospital Training School for Nurses would have to be changed to Ladies Committee on the General Hospital School of Nursing.
5. The Alumnae Association is about to incorporate. There are certain places in their constitution and by-laws where the name of the school would need to be changed. The official name of the Alumnae Association itself is "Massachusetts General Hospital Nurses Alumnae Association." The word "school" is not included.

THE REMINISCENCES

OF A

CONNECTICUT
YANKEE

Healthwise and Otherwise



Sally Johnson

The New England Division of the American Nurses Association

Presidential Address

Given by Miss Johnson at New Haven Convention—The significance of last paragraph is more fully understood when the reader knows that the speaker of the evening took for her subject—"Whither Nursing."

April 11, 1929

Perhaps the fact that custom has exacted Presidential Addresses at the opening meetings of our various conventions, is one of the reasons why many qualified women decline nomination to the office of president. During the last month your President has felt that this custom is indeed sufficient reason for declining the office. Such addresses usually review the progress of nursing since the last convention, and foretell what should be the line of progress before the next. To this review and prophecy are added words of congratulation upon the past accomplishments and words of inspiration to stimulate further accomplishments.

Now, the recent past in nursing is reviewed on the printed page of the American Journal of Nursing. The future is the subject of our speaker of the evening. Therefore, I shall refer neither to the past nor to the future of nursing.

Our Constitution states that the third object of this organization is "to bring the New England Nurses into a closer fellowship." It is upon that statement that I claim my constitutional right to present the following variation as a Presidential Address. My only excuse for such a personal narrative is the hope that the incidents related may awaken pleasant personal memories in the minds of my hearers, and thus bring us all into closer fellowship. This hope is based upon the fact that many of my hearers were born and reared in rural New England. From others I beg indulgence. The narrative is fact, not fancy, and is entitled: "The Reminiscences of a Connecticut Yankee—Healthwise and Otherwise."

Over how long a period of time must memory carry to warrant the use of the word "reminiscence." Perhaps a memory which extends over nearly half a century is sufficient warrant. What qualifications entitles a woman to call herself a Connecticut Yankee? Perhaps a woman who is of the seventh generation to be born within thirty miles of this spot might qualify.

The speaker's maternal ancestors was one of three families to settle the town of Woodbury. Tradition states that when there was disagreement among the members of these families, the Minor family took their troubles to the Lord; the Atwood family took their troubles to the Law, but the Judson family kept still, stayed at home, and worked like Hell. The Connecticut Yankee is of the Judson family, and when she once related this tale to Dr. Herbert Howard he said: "I can understand how you came from the family that stayed at home and worked, but keeping still does not fit into the picture."

The Connecticut Yankee was one of two children, born eleven years apart. Therefore, the family physician, had seldom accompanied the stork to that household, and when he arrived one May morning in the early 80's and found the stork had again visited that household, he exclaimed: "Good heavens, is this what I am here for?" Pre-natal visits were considered unnecessary and hardly decent, but Doctor Gates knew all the perils of maternity. He was once heard to remark: "If the husband and wife took turns bearing the children there would never be more than three in the family. The wife would have the first child, the husband the second and the wife the third. There would be no more."

The second summer brought what was then called cholera infantum,—today called summer complaint. As a last resort whiskey was given, and as a child the Connecticut Yankee often heard that whiskey had saved her life. She rather enjoyed hearing this for the tale indicated that her life was of some importance. There was little outward evidence of family affection in that matter-of-fact New England family, and this bit of evidence of appreciation was treasured.

This dose of whiskey later brought about an amusing situation. In the early 90's the Women's Christian Temperance Union was in its most active stage. The junior organization was the Loyal Temperance Legion which recruited its members from the emotionally unstable age. At those meetings there were enthusiastic songs, there was stirring marching and soul-searing tracts with weird stories which pictured the awful results of

strong drink. These meetings were held Sunday afternoon, and Sunday afternoon in a little town forty years ago was very dull. Camp fire girls, junior Red Cross, girl scouts and the 4 H Clubs were unheard of. Consequently, membership in that Loyal Temperance League was very desirable. But, a requirement for membership was a signing of the temperance pledge. Whiskey had once saved the life of the little Connecticut Yankee and who knew but what there might be another such call. In her family a pledge was a pledge, and loyalty to the saving power of whiskey conflicted with the requirements of this pledge. The child withstood much pleading, many accusations and an occasional allusion to eternal damnation. By making herself extremely useful to the organization by doing the mean jobs, by learning to read the weird stories in the most harrowing manner and by bringing more than her share of good food, she managed to gain all the pleasure of that organization without affixing her name to the temperance pledge. Remember that was the day when the substantial citizens, both men and women wore a little bow of white ribbon to publicly declare their stand on the question of prohibition.

Nor was that the only association with strong drink. For what drink is stronger than hard cider? It was stored in the cellar, not by the gallon or by the keg, but by the barrel. One of the earliest fears experienced by the Connecticut Yankee, was that of being alone with her mother for several nights while the father "went out to watch," at the bedside of a sick neighbor. What a strange term "watch." It indicated watching for a change, watching for evidence of some need, and often watching for death. Night after night that mother and child heard some one walking around in the cellar,—the snap of the spigot,—the swish of the stream of cider. The mother said: "That's probably Jim." (The hired man.) The child knew the mother was afraid, but only re-assuring words crossed her lips. The experiences of those nights taught self-control. The cellar door was never locked and the man was never told to keep away.

The fears of the country reared child are very different from those of the city reared child. With Spring came the tramp. One who was a ventriloquist frightened the subject of this sketch out of nearly a year's growth. The "Old Leather Man" who lived in a cave near the town of Wolcott was harmless and his first visit through the countryside was a sure sign of Spring.

But there were strange men who were natives. No one understood senility. Mental hygiene was unheard of and custodial care for the person with a mild form of mental illness would

have been looked upon as depriving a citizen of his rights. Therefore, Rufus Black lived in his dilapidated old house, opened an umbrella over his bed when he crawled in at night, pushed unsplit chunks of wood into the always open door of his air-tight stove, until he finally burned up his old house. He "lost his mind" so his story went, because his girl jilted him to marry his brother. His most treasured possession was reported to be the diamond ring the girl had returned. Many a youth and maiden hoped to get a glimpse of that diamond ring.

Then there was old Mr. Prince who lived all alone down by the saw mill. A beautiful wife had died young, and he had once been a prosperous citizen, but gasoline engines came to saw the timber in the woods where it was cut. There were no children to look after him. Mr. Prince was overtaken by senility and walked through the streets by day and by night. He often bought rice which he ate raw, followed the rice by quantities of water. He explained that the rice then swelled, and as a result he felt well fed on the expenditure of only a few cents.

Then there were two strange women, wealthy and of high social station, belles of a former day who returned to the farm of their ancestors. There they lived in seclusion, victims of a group of drugs which could be bought at any country store,—Jamaica ginger; Paregoric, and laudanum. There was no Harrison Law. These women were cited as an example of the awful end which might come to any little girl who grew too fond of paregoric. It was well to endure some green apple stomach ache.

Dosing was looked upon with disfavor. Prevention had a definite place. If one sneezed, generous inhalations from the camphor bottle prevented many pneumonias. If one stepped on a rusty nail, lock-jaw was less likely to "set in" if a large piece of salt pork were bound over the place where the nail entered. A wide piece of red flannel bound around the neck about November 1st did considerable toward preventing sore throats. About March 1st, a narrow strip of the flannel was cut off each week, until the piece got down to shoe string width about April 15, and then could be entirely removed without danger. Opinions varied about the wisdom and method of washing the neck between the dates of November 1st and April 15.

Rheumatism was an integral part of every grandfather, though sometimes relieved by arnica. Women of a certain age talked of their symptoms and bidding little girls "run along and play" discussed the merits of a much advertised "compound." Some grandmothers prolonged an appearance of youth by pin-

ning a dark switch on to their graying heads, and by darkening the gray part with a generous application of sage tea. Others were sure their tresses were thickened by the hair tonic of the Seven Sutherland Sisters.

Many of the health rules of today received scant attention forty years ago. Water did get inside the body in fairly liberal quantities,—not by means of eight glasses a day, but by means of a frequent draft from the tin dipper in the water pail. For many months of the year very little water got on the outside,—below the clavicle, or above the oleocranon process—about the only time was Saturday night. The cold morning plunge was not into cold water but into the frosty air of the bedroom. Of fresh air there was a plenty. Fresh vegetables and fresh fruits made a creditable showing. Eggs, cereals, jellies and the appetizers such as “pick-a-lily” and ketchup were there. But pie,—how did the Connecticut Yankee or any child of her generation survive the pie. Contemplate that row baked every Saturday morning,—custard or one crusted apple pie being the first to soak its crust was eaten that Saturday noon. The tart pie (interpreted boiled cider apple sauce) was eaten on Sunday noon;—pumpkin on Monday; a two crusted apple pie on Tuesday, and Wednesday; the hardy mince could be saved for Thursday. Friday brought rice pudding for relief, and Saturday started off with the repeated program.

Infectious diseases visited the little community, but for some unknown reason did not spread. One of the earliest recollections of that new species, the trained nurse, was when the local news in the Waterbury American had this item: “Miss Emily Bissell is ill with typhoid fever. She has a trained nurse. All her friends extend heartfelt sympathy.” There actually was just as much sympathy extended to the family because of the presence of the trained nurse, as was extended to Miss Emily Bissell because of the presence of Typhoid Fever.

Child psychology and habit clinics were not known. Summer camps had not brought relief from the continued strain of child care, and at times the tension got rather taut. Parents talked of using common sense in bringing up their children and on the whole they used it. Yet the parents of today would do well to recall some of the mental anguish they suffered as children,—often inflicted by those who loved them best. Children are always asking father to tell “something that happened when you were a little boy.” The Connecticut Yankee remembers the mental agonies she suffered as the result of the response on the part

of her father to such a request. The story went something like this: "When I was a little boy, Jed Clark had a thin old spavined horse. Jed owned very little land and he let his horse feed up and down the highway. The horse was a nuisance to the neighbors and was a miserable old creature anyhow. One dark night another boy and I lead the old horse down into the woods and shot him." Then followed a description of the old man's hunt for the horse, the questioning of the two boys, and the midnight burial of the old horse. The small girl asked: "But father didn't you steal that horse?" There could be only one answer. Next she asked: "If you were found out could you have been put in jail?" "I suppose we could have been" was the honest answer. The damage was done. Only those who know the mental reactions of a high strung child, who know the love of an only daughter for a worthy father can understand the suffering of the little girl. For days no strange man came on to the farm but what she feared that he was some one who had found out who killed that horse and that perhaps he was the constable who had come up from Watertown to take her father to jail. She got up at night to see if he were safe in bed. The story was never retold,—the members of the family were too busy recovering from one telling.

Another similar experience resulted from the child's desire to possess a pair of ponies, and what country child of the early 90's did not long for a pair of ponies. Explanation as to the cost of ponies, cart, harness, feed and the necessary care of these made no impression. Children of all generations have some times teased to the point of exasperating their elders, and probably at just that point a member of the household told the little Connecticut Yankee that if she were Mr. Jordan's little girl (he was the richest man in town) she could have a pair of ponies. He was building an ice pond on the place, and the fact that he was plainly seen from the kitchen window probably accounted for the suggestion: The idea of adoption flashed through the child's mind so she inquired if it would be good form to approach Mr. Jordan on the subject. Displaying poor judgment, an adult member assured the child that such an approach would be in quite good form. So down to the ice pond went the little girl to take up the subject of adoption with Mr. Jordan. He responded favorably to having a little, red haired, freckled face girl in his home, and the ponies were promised for immediate delivery. Two members of the family amused themselves the remaining part of the afternoon by stimulating the enthusiasm of the child, and

did up her night dress and a small shawl ready for her departure. She was assured that when she went to live with Mr. Jordan she would have far grander clothes than any she now possessed and so, of course, would not need to take her dresses. Quitting time came. Mr. Jordan with his oxen hitched to a stone-boat, stopped in the drive. The little Connecticut Yankee tucked her bundle under her arm, nodded good-by to her mother and to a maiden aunt, walked out the door and was half way across the yard when she saw her father standing at the barn door. There was a strange look on his face. The child stopped, looked at Mr. Jordan, then at her father, then back at Mr. Jordan and then again at her father, who spoke not a word. She threw her bundle down onto the ground and ran to the waiting arms of her father, walked right up the front of him for he was a big man. He hugged her a minute, set her down and led her off to help do the chores. That man probably never heard the word "psychology" but he knew some of its principles for he kept the child busy and entertained until bed time. Few children of today know the black darkness of the rural nights of yesteryear. No half-light from the street lamp, no occasional light from the passing automobile. The moon never did shine when one felt especially frightened, and that night a frightened child tossed in her bed, and sat up again and again to peer out into the dark room in an effort to recognize familiar objects and so assure herself that she was at home. That wound was a lasting one.

In the little town of five hundred persons were found examples of all the social problems and social diseases. There was the gambler, the misappropriator of funds, the delinquent boy, the feeble-minded girl, the sex-pervert, the unmarried mother, even the taker-of-life, for in 1886 the most prominent young woman of the village was shot to her death by an itinerate hired man, he himself the black sheep of a good family of the neighboring town of Goshen. The life of the small New England village had its tragedies. There were no organized welfare societies. A great deal was expected of the only one,—the church, and its activities were circumscribed indeed.

Nor were all the neighbors kindly and friendly. Once a misguided neighbor caused much unhappiness in the family of the Connecticut Yankee over an alleged cruelty to a farm animal on the part of the child's father. There was a long and costly lawsuit. The father withdrew his church membership and never again entered its doors, the mother at this time became an invalid, and the brother went away to school. The small daughter, aged

eight, however, must continue at church and Sunday school. That family asked no favors of neighbors in the way of carrying an extra passenger to church so Old Tom, the sorrel horse, harnessed to the Concord wagon, was led to the horse block each Sunday morning at ten thirty. The Connecticut Yankee climbed into the seat, the reins were put into her hands, the horse was started and she was told to pull the rein on the same side as the whip socket when she reached the church drive. No further guidance was necessary for old Tom as the result of the habit of fifteen years, turned into the family church shed, and would back out and come home unguided.

What a reminder of a foolish neighborhood quarrel that child must have been as she sat all alone in that great family pew half way down the center aisle. She occupied that pew all alone for five years, until her brother brought his bride to it. Mrs. Atwood, the little old lady who sat behind must have felt that the child was lonely for she dropped many pink and white peppermints over the back of the seat and many a sprig of fennel.

Have any of you ever heard the bell of a country church toll out the announcement of the death of one of its parishioners? Will you ever forget the sound? It gave a feeling of awe and reverence. The bell tolled four times and paused if the person who had passed on was a man, three times and paused if a woman. The total number of tolls equalled the age of the departed. Neighbors counted the toll and some were always "surprised at the age." Soon neighbors travelled from door to door (telephones in homes could be counted on the fingers of one hand) the virtues of the deceased were discussed. There might be an allusion to the probable amount of the estate left, and the hour of the funeral was discussed. One lady was often heard to remark: "I always like to go to funerals. It gives me an opportunity to see how people's houses are furnished." The visitors soon dispersed to survey the larder, perhaps to stir up a cake, or boil a ham, for after supper and the chores were done, teams were seen driving toward the home of the bereaved family.—"a little something" was being taken over, for relatives and friends would be coming long distances and all must be fed before the return journey. The personal service that was rendered in the hour of distress was one of the outstanding virtues of rural New England of a half century ago. The memory of one such service will be cherished in the mind of the Connecticut Yankee as long as memory lasts.

On a fierce, wintry night, wind blowing, snow falling and drifting, the first grandchild of the home lay desperately ill with membranous croup. The doctor had to be brought but digging had to be done before the barn could be reached. The girl now in her teens held the lantern while the father dug his way to the barn. Looking across the field she saw a neighbor's lantern, evidently being carried around the door yard. The digger remarked: "Mr. Holcomb is late with his chores tonight." Half an hour later a knock came at the door, and in response to the call "come in," Mr. Holcomb entered. He stamped the snow from his boots. He broke the ice from his eyebrows and said: "I watched your lantern for a while and I heard your sleigh bells. I knew that no one was getting out a night like this unless it was necessary. I knew your little girl was ill, and I thought perhaps I could do something for you so I came over. Is there anything I can do?" The young mother of the sick child replied: "Father has gone for Doctor Pike, and he must take the doctor back. The digging will have to be done all over again for the snow is blowing. If you could wait and make this second trip with father it would be a great help." "I shall wait," said Mr. Holcomb. It was long after midnight before horse and man were bedded, and work on a New England Farm, even in winter, began at five thirty in the morning. How memory treasures such examples of neighborly kindness!

Time will allow for only the briefest reference to the social customs of that little village. Today the old folks shake their heads as they observe the parked cars along the road sides of the little town, but have these old folks explained to this generation the custom of "bundling," prevalent in this very region one hundred years ago? Probably not. And who in this room, born in the 70's or 80's has told her daughter or her niece all the details of pung straw rides in winter, and of buggy dashing in summer? The swain who owned a horse that would stand without hitching did not consider himself entirely out of luck. And what of the old game of Post Office? Is it strange that the youth of today turn a deaf ear to the prating of the youth of yesterday?

A moment must be taken to relate a fashion craze that blossomed during the summer that high-crowned sailor hats were in fashion. When the wearer of the sailor hat was a brunette, a red, yellow or pink silk ribbon encircled the crown of her hat and a sash ribbon of the same color encircled her twenty-four inch waist. When the young woman was a blond, green, blue, or white were the colors of her ribbons. If the young woman's

best fellow (the word boy friend had not been coined) had a "snappy" turnout; she tied three quarters of a yard of her sailor hat ribbon into a perky bow on his horse whip. This was considered a little bizarre, and was not allowed by ultra-conservative mothers, to which group the mother of the Connecticut Yankee belonged. Nevertheless, many blue, red, and pink bows were swung over the backs of well-groomed bays and grays in the summer of '96.

The older women had their hats trimmed on the congregation side. If the family pew was on the left, as the church was entered, the violets and lilies of the valley were sewed on the right side of the hat, and if the pew was on the right side of the church, the trimming went on to the left side of the hat. To have the smart milliner of the next town say: "Your pew is on the left side of the church, isn't it Mrs. Whittlesy," was a mark of distinction.

Next Saturday evening after this convention is over, the Connecticut Yankee will visit her home in that same little town of less than six hundred souls. She will not go by train, and by the horse drawn mail stage, lumbering through mud up to the hub,—a journey of half a day, but by motor over a macadam road in about an hour and a half. Forty years ago when she came within site of the house, the light of an oil lamp extended its welcome from the front of the house and the light of another oil lamp in the kitchen showed that supper was being prepared. Next Saturday night, the house will be lighted all over and even out on the front porch because electricity has reached the town. The house will not have been cleaned by a corn broom dampened with tea leaves, but by a vacuum cleaner. When she calls her friends on the telephone she will not stand up in front of a cumbersome instrument and whirl a crank, she will only remove the receiver from the hook. Later in the evening the Connecticut Yankee will turn on the radio and listen to the Boston Symphony Orchestra playing one hundred miles away in the city of her adoption. The family and the home comer will discuss ways and means of installing a Crane equipped bathroom, and ways and means of installing a heating system that turns on the heat by moving a thermostat an eighth of an inch. That night she most certainly will not sleep on a feather bed, but on a hair mattress.

On Sunday morning a gray-haired woman, with another generation of Connecticut Yankees, will sit in the same church pew where the lone little girl sat forty years ago and ate the pink and white peppermints and the yellow fennel. But what a change!

A furnace has replaced the smoking stove. A pipe organ has replaced the old wheezy organ. It is played by a native daughter who is a graduate of the Yale School of Music. Individual communion cups have replaced the common goblet. Lovely cream and white paint has covered the illuminated mottoes and the memorial tablet. The Shepherd of the Flock is a man of ability. After the service there is the same social interchange. The Connecticut Yankee is amazed to see how old her contemporaries have grown. Of course, she has not changed like that, she thinks.

Sunday afternoon friends will drop in, married nieces and boy friends of other nieces will come distances in half an hour; distances that formerly took half a day. Monday the Connecticut Yankee will enjoy a well earned rest, and Tuesday, by bus and train, she winds her way back to her job. As she rides along through lovely Southern New England, she is grateful for the environment of that home, that blessed home, set in a little rural New England village, where there was space, clean air, glorious sunsets in the evening, starry heavens at night, always a beautiful landscape,—a place where a fine people lived ~~happily and without os-~~ **their lives with sincerity and dignity.**

But the reminiscences come to an end. The train has borne the Connecticut Yankee into a city,—the Hub. A taxicab whisks her over behind the State House and stops in front of a great hospital. She enters one of the buildings, and then her office, hangs up her coat and hat, pushes up the roll top of her desk, surveys neat piles of letters and several questionnaires, sits down, cups her chin in her hand and asks: "Whither Nursing."

